"Safety is the seam that joins the fabric of life...don't let a loose thread bring it all undone."

GUIDE TO WORKPLACE SAFETY



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INTRODUCTION

HEALTH AND SAFETY: ORGANIZED LABOUR'S FIGHT FOR WORKERS' RIGHTS

The history and struggle for health and safety legislation in Ontario parallels the growth of organized labour in this province, which have championed this cause on behalf of all workers. The first major piece of labour legislation was the *Factories Act* of 1884, which was modeled after the *British Factory Act* of the early 1800s. The Act set up a system of inspection to ensure health and safety standards in factories but was vague, unenforceable and biased toward production and the employer.

Major changes in health and safety came in the 1960s and early 70s with the tragic loss of life of workers building the subway system in Toronto (Hogg's Hollow)^I and the continued occupational death of workers at the Elliot Lake uranium mine led to the first major labour strike on health and safety issues. II The Elliot Lake strike forced the Ontario government to establish another Royal Commission (Ham Commission)^{III} to investigate health and safety conditions in the uranium mines and make recommendations to the government.

The *Ham Commission Report* contained many recommendations but the major recommendation was to increase workers' knowledge of health and safety in the workplace. Another major recommendation was the formation of an Internal Responsibility System (IRS), which created a shared responsibility between labour and management for health and safety. As a result of the commission, the first *Occupational Health and Safety Act* was passed by Ontario Legislature in 1978 and proclaimed into law January 1, 1979.

Workers, however, continued to die from occupational diseases directly related to chemicals and dangerous substances present in their workplaces. In 1984 the *Report of the Royal Commission on Matters of Health and Safety Arising from the Use of Asbestos in Ontario* focused attention on the use of asbestos and the world-class occupational health disaster at the Johns Manville plant in Scarborough and the Holmes Foundry in Sarnia. Strong and effective lobbying by labour unions led to the inclusion of regulations in the Act governing the management of asbestos in building and on construction sites.

The growing concerns being raised with regards to the increasing use of chemicals in the workplace led to the 1987 passage of Bill 79 which added Workplace Hazardous Materials Information System (WHMIS) to the Act granting us our right to know and question the chemicals present in the workplace and their effects on workers' health.

The last major change in the Act came on June 15, 2010 with the inclusion of Section 32 of OHSA in regards to Violence and Harassment in the workplace. Organized labour had long seen the need to create protection in the workplace from violence and harassment. After the death of a health care worker at the hands of a co-worker, violence in the workplace came to the attention of the general public. Through strong lobbying efforts on the part of labour, and despite strong resistance on the part of management, the law became a reality.

Health and Safety is the lasting gift of all organized labour to workers in this province. But, these efforts have been driven by the needless and untimely deaths of thousands of workers. Occupational Health and Safety is a legacy of labour and it is our responsibility to protect it for generations of workers yet to come.

¹ The death of five construction workers on March 17, 1960 prompted the Ontario Government to order a Royal Commission (McAndrew Commission) to study and modernize all worker safety regulations.

^{II} Elliot Lake wildcat strike started on April 18, 1974 - for more information ltjournal.ca/index.php/lt/article/viewFile/5678/6541.

^{III} Dr. James Ham was appointed in 1974 to lead the commission and the Ham Commission Report was published in 1976.

AN OVERVIEW OF RELEVANT LEGISLATION

FEDERAL LEGISLATION

HAZARDOUS PRODUCTS ACT

The Government of Canada, Department of Health, administers the *Hazardous Products Act*. This Act provides rules for suppliers on labelling and Material Safety Data Sheet (MSDS) requirements.

BILL C-45 CRIMINAL LIABILITY OF ORGANIZATIONS

In November 2003, the Criminal Code of Canada was amended to make organizations and "senior officers" of organizations criminally liable for negligence-based claims. Those people who have responsibility for directing the work of others now have an explicit legal duty to take reasonable steps to prevent bodily harm arising from such work.

Under this law, "organization" means not only a public body, corporate body, society, company or municipality, but also a firm, partnership or trade union. School boards, universities, and indeed all employers of OSSTF/FEESO members fall under this definition. New sections of the Criminal Code now allow for special sentencing of organizations and individuals.

ENVIRONMENT PROTECTION ACT

In 1980, the *Environment Protection Act* became law with the intent that stricter controls on waste disposal would assist in the protection of our land, air and water. In 1986, Regulation 347 mandated that employers must evaluate all wastes. If wastes are found to be hazardous or liquid industrial waste as defined by the regulation then those wastes must be registered with the Ministry of Environment. In order to monitor the disposal of these wastes, employers must now have registration numbers from the Ministry of Environment and utilize an approved disposal company.

PROVINCIAL LEGISLATION

EDUCATION ACT

Section 301 of the *Education Act* provides the framework for the provincial Code of Conduct that is intended to promote the safety of people in schools.

Section 265.1(j) outlines a principal's duty to "give assiduous attention to the health and comfort of the pupils, to the cleanliness, temperature and ventilation of the school, to the care of all teaching materials and other school property, and to the condition and appearance of the school buildings and grounds."

Teachers have the duty under this act to ensure that all reasonable safety procedures are carried out in courses and activities for which the teacher is responsible.

SAFE SCHOOLS ACT

In 2000, the provincial government enacted legislation that amended both the *Education Act and the Teaching Profession Act*. In essence, the act directed school boards to create board policies that aligned with the mandated repercussions for students who engaged in prohibited activities. The act also gave teachers the right to suspend students (306.(3)) for a period of one day, but OSSTF/FEESO recommends that teachers direct their concerns to the principal.

The following student infractions require suspension by law (s. 306.(1)): It is mandatory that a pupil be suspended from his or her school and from engaging in all school-related activities if the pupil commits any of the following infractions while he or she is at school or is engaged in a school-related activity:

- **1.** Uttering a threat to inflict serious bodily harm on another person.
- 2. Possessing alcohol or illegal drugs.
- 3. Being under the influence of alcohol.
- **4.** Swearing at a teacher or at another person in a position of authority.
- Committing an act of vandalism that causes extensive damage to school property at the pupil's school or to property located on the premises of the pupil's school.
- **6.** Engaging in another activity that, under a policy of the board, is one for which a suspension is mandatory.

The following infractions require expulsion by law (s. 309.(1)):

It is mandatory that a pupil be expelled if the pupil commits any of the following infractions while he or she is at school or is engaged in a school-related activity:

- **1.** Possessing a weapon, including possessing a firearm.
- 2. Using a weapon to cause or to threaten bodily harm to another person.
- Committing physical assault on another person that causes bodily harm requiring treatment by a medical practitioner.
- 4. Committing sexual assault.
- 5. Trafficking in weapons or in illegal drugs.
- 6. Committing robbery.
- 7. Giving alcohol to a minor.
- **8.** Engaging in another activity that, under a policy of the board, is one for which expulsion is mandatory.

THE OCCUPATIONAL HEALTH AND SAFETY ACT (OHSA)

By far the most powerful act available to workers in this province, many OSSTF/FEESO members are unaware of their rights and responsibilities and the employer's responsibilities under the OHSA. The OHSA guarantees the three basic rights of workers: the right to know, the right to participate and the right to refuse unsafe work. The OHSA also provides:

- Legislative authority for the establishment of Joint Health and Safety Committees (JHSCs).
- Enforcement powers to the Ministry of Labour for offences and penalties for violations of the OHSA.
- Definitions of the duties of employers, workers, supervisors and joint health and safety committee members.
- Protection for workers against reprisals.
- More detailed information is available in "Highlights of the Occupational Health and Safety Act" of this manual.

There are many regulations under the *Occupational Health and Safety Act* that are prescriptive in nature and are also enforced by the Ministry of Labour. Some examples relevant to OSSTF/FEESO members are listed below:

REGULATION 851—INDUSTRIAL ESTABLISHMENTS

This regulation outlines rules on issues such as machine guarding, material handling, temperature, noise, lifting devices, lighting and housekeeping and building safety.

REGULATION 857—TEACHERS

Prior to 1984, teachers were not included in the *Occupational Health and Safety Act*. This regulation brought teachers under the provisions of the OHSA, with some specific restrictions on the right to refuse unsafe work. Principals and vice-principals are deemed to be supervisors under this Act. OSSTF/FEESO has been very successful in determining that department heads are not supervisors under this regulation as they have no managerial functions, e.g., they do not hire, dismiss, demote or discipline other workers.

REGULATION 834—CRITICAL INJURY

This regulation defines what sorts of injuries are deemed to be critical, e.g.:

- places life in jeopardy
- produces unconsciousness
- · results in substantial loss of blood
- involves the fracture of a leg or arm but not a finger or a toe
- involves the amputation of a leg or arm but not a finger or a toe
- consists of burns to a major portion of the body
- · causes the loss of sight in an eye

REGULATION 860—

WORKPLACE HAZARDOUS MATERIAL INFORMATION SYSTEM (WHMIS)

This regulation ensures that Ontario workplaces comply with federal legislation (Hazardous Products Act). It details the rules for the storage, use and handling of controlled products by way of a standard labelling system, worker education and specific details regarding Material Safety Data Sheets (MSDS). A new legislation will come into effect in 2015 mandating the use of the Global Harmonized System (GHS). See Global Harmonized System section.

REGULATION 297—AWARENESS AND TRAINING

The regulation effective July 1, 2014 requires mandatory supervisor training and mandatory worker awareness training. The training program requirements are prescribed in the Regulation and include:

- A duties and rights of workers
- **B** duties of employers and supervisors
- **C** common workplace hazards
- D the role of JHSCS
- E information on WHMIS

REGULATIONS 490/278—DESIGNATED SUBSTANCE/ASBESTOS ON CONSTRUCTION PROJECTS AND IN BUILDINGS AND REPAIR OPERATIONS

These regulations designate asbestos as a designated substance and outline the responsibilities of employers to train workers in safe work practices while working in proximity to asbestos and to identify and inform workers of the presence of friable material. The OHSA also identifies the types of abatement procedures and remedial actions to be taken when asbestos is being removed.

THE WORKPLACE SAFETY AND INSURANCE ACT (WSIA)

This Act provides for an employer-funded system of compensation for workers who suffer wage loss due to a workplace injury or illness. It also establishes safety associations for workplaces including the Workers Health and Safety Centre (WHSC), Infrastructure Health and Safety Association (IHSA), Public Services Health and Safety Association (PSHSA), Workplace Safety North (WSN), and Workplace Safety and Prevention Services (WSPS). Please note that it is the policy of OSSTF/FEESO that the WHSC is OSSTF/FEESO's preferred safety association.

The OHSA also outlines the duties and responsibilities of all stakeholders. There are also regulations under the WSIA that are enforced by the Ministry of Labour.

REGULATION 1101—FIRST AID

All employers covered by the WSIA are required to have first aid equipment, facilities and trained personnel in all workplaces. The regulation prescribes what should be included in every first aid box and requires that Form 82, a large poster entitled "In Case of Injury at Work" must be posted in every workplace in a location visible to all workers. It also requires that the certificates of all certified first aiders be posted.

THE CORONERS ACT

The *Coroners Act* defines when an inquest into a fatality is held. Inquests are mandatory when deaths occur in the construction sector or the mining sector or if someone dies while in the custody of the police or a corrections facility. Other inquests may be held at the discretion of the Coroner when it is deemed that the public would benefit from knowing more about the fatality and that recommendations will arise out of this knowledge. Prior to an inquest being held, all criminal charges and appeals must be heard.

OSSTF/FEESO members who work in correctional facilities may be called as witnesses in an inquest where there was a fatality.

THE ONTARIO FIRE CODE

This code sets standards for fire safety in buildings and requires that exit routes are not blocked, evacuation procedures in case of fire or fire drills be in place and the occupancy limits for specific areas are enforced. Local fire marshals establish specific criteria for workplaces.

THE ONTARIO BUILDING CODE

This code sets minimum safety provisions for buildings. Municipalities have jurisdiction in the enforcement of this code.



NATIONAL DAY OF MOURNING—APRIL 28



In 1984 the Canadian Labour Congress endorsed the first Day of Mourning to recognize workers killed and injured on the job. The date was chosen as a day of remembrance as this was the day that the first comprehensive *Workers' Compensation Act* (Ontario 1914) received third reading.

In 1991 the Canadian Parliament officially recognized the day with the *Workers' Mourning Day Act*. Since then, the Day of Mourning is now observed in nearly 100 countries worldwide. In Ontario, our local labour councils, and the Workers Health and Safety Centre, coordinate and plan close to 50 ceremonies around the province to observe the National Day of Mourning.

The statistics regarding Ontario worker deaths and work-related injuries and diseases are extremely alarming. During the period of 2008–2012, Ontario has had 1,803 recorded deaths at workplaces. During this same time period, there have been 1,291,877 total workplace injury claims filed with the Workplace Safety and Insurance Board in Ontario.

On average, during the period of 2008–2012, three workers die every day in Ontario workplaces.

We would encourage employers to lower the Day of Mourning flag, attend a ceremony and observe a moment of silence for fallen workers.

HIGHLIGHTS OF THE OCCUPATIONAL HEALTH AND SAFETY ACT

THE RIGHTS OF WORKERS

Under the Occupational Health and Safety Act, employees are guaranteed three basic rights:

- · the right to know
- · the right to participate
- the right to refuse unsafe work

THE RIGHT TO KNOW

Under Section 27 of the OHSA, employers have a duty to inform a worker of any actual or potential hazard that exists in the workplace. Workers have the right under the WHMIS Regulation to be provided with information about a controlled substance with which they are working by way of Material Safety Data Sheets. Workers also have the right to know via a regulated labelling system what sort of materials they are dealing with and training on controlled products that they handle or are likely to handle.

THE RIGHT TO PARTICIPATE

Workers have the right to participate in their workplace health and safety activities under Section 9 of the OHSA. Worker members of a Joint Health and Safety Committee:

- · carry out workplace inspections
- · meet once at least every three months
- make recommendations for programs and procedures respecting health and safety
- · identify hazards
- · make recommendations to address hazards
- · have the right to be consulted about health and safety testing
- have the right to receive certification training if they are designated to be the worker certified member

All workers have the right to report unsafe conditions or health and safety concerns and are entitled to see the minutes of Joint Health and Safety Committee meetings as well as having access to a copy of the OHSA that is to be posted in a designated location for health and safety information. Every employer should have an accident/incident reporting form that is particular to the employer. Members should complete the form in order to maintain a record.

THE RIGHT TO REFUSE UNSAFE WORK

This right is probably the least utilized amongst OSSTF/FEESO members but provides the most protection for workers. Section 43 of the OHSA details the process for refusing unsafe work.

Workers have the right to refuse work if they believe that:

- The equipment, machine, device or thing they are using is likely to endanger them or another worker.
- The physical condition of the workplace is likely to endanger them.
- There is a contravention of one of the above elements of the OHSA that is likely to endanger them or another worker.

Students are not deemed to be a "thing" that is likely to endanger a worker but the lack of procedures to deal with a certain student could very well be deemed to be likely to endanger a worker.

Teacher members should ensure that the lives, health or safety of their students is safeguarded before initializing a work refusal. OSSTF/FEESO Right to Refuse wallet cards that outline the work refusal process are available through OSSTF/FEESO Provincial Office.

DUTIES AND RESPONSIBILITIES

Under the OHSA there are specific groups that have duties and responsibilities: employers, supervisors, workers, joint committees, Ministry of Labour, certified workers, district school boards, universities and other employers.

THE DUTIES OF AN EMPLOYER

An employer must:

- Provide information, instruction and supervision for the protection of workers (s. 25.2(a)).
- Take all reasonable precautions for the protection of workers (s. 25.2(h)).
- Ensure that all equipment required by the OHSA or Regulations is provided, maintained in good condition and used properly by workers (s. 25.1).
- Develop and review annually a written health and safety policy, post it in the workplace and maintain a program for its implementation (s. 25.2(j)(k)).
- Prepare a policy with respect to workplace violence and harassment and review the policies as often as is necessary but at least annually (s. 32.01(1).
- An employer shall provide a worker with information and instruction that is appropriate for a worker on the contents of the policy and program with respect to workplace harassment and any other prescribed information (s. 32.07).
- For a greater certainty, the employer duties set out in Section 25, the supervisor duties set out in Section 27, and the worker duties set out in Section 28 apply, as appropriate with respect to workplace violence (s. 32.05 (1)).

NOTE:

OSSTF/FEESO does not consider Department Heads as supervisors under the Act.

THE DUTIES OF SUPERVISORS

Supervisors are persons who have the right to hire, dismiss, demote or discipline.

A supervisor must:

- Ensure that workers comply with the OHSA and Regulations (s. 27.1(a)).
- Ensure that workers wear or use required protective equipment, and follow all required measures and procedures (s. 27.1(b)).
- Advise workers of all existing and potential hazards (s. 27.2(a)).
- Provide written instruction on measures and procedures to be taken where required (s. 27.2(b)).
- Take all precautions reasonable in the circumstance for the protection of workers (s. 27.2(c)).

DUTIES OF A WORKER

For the most part, all OSSTF/FEESO members are workers under the OHSA. As a worker you are required to:

- Work in compliance with the OHSA (s. 28.1(a)).
- Use or wear any equipment, protective device or clothing and follow all procedures that the employer requires (s. 28.1(a)).
- Report all safety defects in equipment or missing protective devices or workplace hazard to the supervisor (s. 28.1(c)(d)).
- Report any known violation of the OHSA and regulations to the supervisor (s. 28.1(d)).
- Report injuries to one's supervisor.
- Not remove or make ineffective any required protective devices required by the employer (s. 28.2(a)).
- Not use dangerous equipment or work in such a way that would endanger others (s. 28.2(b)(c)).

DUTIES OF A JOINT HEALTH AND SAFETY COMMITTEE

Each trade union has the right to have a separate Joint Health and Safety Committee unless ordered differently by the Minister of Labour.

- The JHSC must meet at least once every three months (s. 9.33).
- Members of the JHSC are entitled to one (1) hour of paid time for preparation for the meeting (s. 9.34(a)).
- Members of the JHSC are also paid for time spent in carrying out their duties regarding inspections, testing, training and other matters. The rate of pay is the regular rate, or, where applicable, their premium rate of pay (s. 9.34).
- The JHSC must keep a record of its meetings and make these available to a Ministry of Labour inspector if requested (s. 9.22).

DUTIES AND RESPONSIBILITIES OF THE MINISTRY OF LABOUR

The Ministry of Labour is responsible for enforcing the OHSA.



APPEALING A MINISTRY OF LABOUR ORDER

WHAT IS THE PURPOSE OF FILING AN APPEAL?

In certain years the constant emergence of Behavioural Based Safety (BBS) options has become a major concern and a strong reason to appeal a Ministry of Labour order that would appear to support BBS practices. It is also important to ensure employers meet their duties and obligations to ensure worker's safety and health. The last significant reason to appeal is to help set a benchmark for Health and Safety for other workers in the province.

WHO CAN APPEAL A MINISTRY OF LABOUR ORDER (SECTION 61–30 DAYS TO APPEAL)

- · employer
- constructor
- licensee
- owner
- worker
- trade union

REQUIREMENTS OF AN APPEAL

That there has been a contravention of the *Health and Safety Act* or regulations is suspected. Further information or clarification required for an Appeal refer to (s. 54 (1) (f)(k)(m)(n) of the *Occupational Health and Safety Act*. An Appeal must be in writing and must clearly state the purpose and scope of the report and must contain specific information around the issue being appealed. It is important that the person writing the report is having expertise, knowledge in the field of Health and Safety. The Appeals process is outlined in Section 61.(1) of the *Occupational Health and Safety Act*.

WHAT CAN BE APPEALED

Types of Ministry of Labour Orders

- forthwith orders (s. 57.(1))
- compliance orders (s. 57.(1). (4)(5))
- stop use/stop work barrier orders (s. 57.(6) and 58))
- toxic substances order (s. 33)
- multi-site committee (s. 9 (3))

The following can be appealed: an order includes any order or decision made or given, enforcement of any term or condition and refusal to make an order or decision.

CRITICAL TIMELINES

The appeal must be filed no later than 30 calendar days after the making of order and responses can be made no later than 21 calendar days before the hearing date.

LEGAL OBLIGATIONS THAT CREATE A BASIS FOR APPEAL

The Act clearly states that Employers must: identify hazards in the workplace, identify foreseeable accidents and take reasonable effort to prevent accidents. Foreseeability is being aware of hazards or the employer did not know, but ought to have known that a reasonable person in their position would have known. The jurisprudence clearly illustrates the grounds for an employer's defence and must be weighed in the decision to appeal. Has the employer demonstrated reasonable care in addressing the potential hazards in the workplace? One of the best indicators of reasonable care is the development of programs for prevention of injuries related to the hazards. The other defence available to employers is a reasonable belief in mistaken facts.

MAKING A DECISION TO APPEAL OR NOT TO APPEAL

One of the major decision with regards to appealing or not is the question of whether the grievance process would better serve the interest of the worker. But, moreover, are there sufficient grounds to appeal the orders. Can this case be won and could this case potentially be a precedent setting case? You should always contact OSSTF/FEESO Provincial Office and discuss the possibility and validity of an appeal.

BEHAVIOURAL BASED SAFETY

Behavioural Based Safety (BBS) is clearly based upon the principle that, it is through individual worker carelessness that is the leading cause of injury in the workplace. The notion that workers are to blame for accidents is not a new concept. It appears the idea originated in the 1930s and 40's with research done by Herbert W. Heinrich, an insurance investigator. The major flaw in the research is that it was based upon bias accident reports submitted by company supervisors wishing to 'blame' someone other than the company for the accidents.

Behavioural based safety refers to a wide range of programs, which focus attention on workers' behaviour as the cause of most work-related accidents. Based upon the principles of behavioural psychology, it is the modification of behaviour through positive (prizes) and negative (discipline) reinforcement. The wide screen TV as a prize for an accident free work zone, versus discipline for unsafe individual work clearly puts one worker against another in the quest for a prize, not a safe and healthy workplace.

The immediate danger of BBS is that it shifts the emphasis from the employer to provide a safe and healthy workplace, to modifying the behaviour of the workers. The modification is rarely a safer workplace but one of fear and underreporting. The underreporting of accidents works in the employers financial favour in terms of lower experience ratings from Workplace Safety Insurance Board (WSIB) which directly impacts the premiums paid and the rebates received from the WSIB. The winner is the employer, the loser becomes the worker.

Behavioural Based Safety was never intended to improve the safety of workers, but to lower the costs and liabilities of employers. The investigation based safety approach is one designed to identify hazards (inspections) and work collaboratively with employers through the Joint Health and Safety Committee (JHSC) to resolve safety issues and potential hazards. It is imperative that worker representatives on JHSC work to ensure that our workplaces do not become the sites of the 'blame game.'

HAZARDS

ASBESTOS

Many buildings utilized by the education sector were constructed using vast amounts of asbestos material as this was seen to be key in limiting damage from fire. In many buildings, asbestos can be found in building materials such as floor tiles, wallboard, pipe elbows, ceiling tiles, science laboratory tables, Bunsen burner pads, etc. Workers have a right to know where the location of all asbestos is within their workplace and employers should have a plan for abating (getting rid of) asbestos within workplaces. Under previous governments, an asbestos management program was mandated. This involved a plan that outlined the removal of asbestos materials by employers. Many employers now only remove asbestos that is damaged (friable) as a regular course of action. Materials containing asbestos should not be disturbed and any friable asbestos should be reported immediately to a supervisor and a union Health and Safety Representative.

Employers must:

Reg. 278/05 8.(3)(4)

- Keep an up-to-date record (Asbestos Registry) of all locations and types of ACM (if known) of friable and non-friable ACM.
- Record of location must be accessible to workers and its location known.
- Inspect all locations of friable materials at 12 month intervals.
- Take action on material that is deteriorating.
- Inform workers in proximity to this material of its location.
- Establish and maintain, for the training and instruction of every worker employed by the owner who works in the building (the hazards of exposure, and instruct on the location of all potential ACM).



ACM REMOVALS (ABATEMENT)

TYPE 1 NON-FRIABLE ASBESTOS REG. 278/05 SUBSECTION 12(2)	TYPE 2 FRIABLE ASBESTOS (LOW LEVEL OF AIRBORNE ASBESTOS) SHORT TERM REG. 278/05 SUBSECTION 12(3)	TYPE 3 FRIABLE ASBESTOS (HIGH LEVEL OF AIRBORNE ASBESTOS) LONG TERM REG. 278/05 SUBSECTION 12(4)
Installing or removal of ACM ceiling tiles—if the area is less than 7.5 square metres (without being broken, cut, drilled, abraded, ground, sanded or vibrated)	Removing all or part of a false ceiling to obtain access if ACM is likely to be lying on the surface of the ceiling	Removal or disturbance of more than one square metre of friable ACM
Installing or removing non- friable ACM other than ceiling tiles (without being broken, cut, drilled, abraded, ground, sanded or vibrated)	Enclosing friable ACM	Spray application of a sealant to friable ACM
Breaking, cutting, drilling, abrading, grinding, sanding or vibrating non-friable materials—wetted to control the spread of dust or fibres and work is to be done with non-power hand-held tools	Applying tape or a sealant or other covering to pipe or boiler insulation that is ACM	Cleaning or removing air handling equipment, including rigid ducting (not including filters) in a building that has sprayed fireproofing that is ACM
Removing less than one square metre of drywall in which the joint filling compound is ACM	Installing or removing ceiling tiles that are ACM if the area is greater than 7.5 square metres (without being broken, cut, drilled, abraded, ground, sanded or vibrated)	Repairing, altering or demolishing all or part of a kiln that are ACM
Measures and procedures— Type 1 operations Reg.278/05 Section 14	Breaking, cutting, drilling, abrading, grinding, sanding or vibrating non-friable materials –is not wetted and work is done only if non-power hand- tools	Breaking, cutting, drilling, abrading, grinding, sanding or vibrating non-friable materials –if the work is done by means of power tools that are not attached to dust- collecting devices equipped with HEPA filters
	Removing more than one square metre of drywall in which the joint filling compound is ACM	Measures and procedures, Type 2 and Type 3 operations Reg. 278/05 Section 15, 16, 17 and 18
	Breaking, cutting, drilling, abrading, grinding, sanding or vibrating non-friable	Clearance Air Testing Reg. 278/05 Section 18 (16)
	materials—if the work is done by means of power tools that are attached to dust-collecting devices equipped with HEPA filters	See Hazard Alert–Types of Clearance Air Testing PCM versus TEM
	Measures and procedures, Type 2 and Type 3 operations Reg. 278/05 Section 15, 16, and 17	Table 3 Air Samples Minimum number of air samples to be taken from each enclosure

POSSIBLE ASBESTOS-CONTAINING MATERIALS IN BUILDINGS

- · acoustical plaster
- adhesives
- · asphalt floor tile
- · base flashing
- blown-in (loose fill) insulation
- boiler insulation
- breaching insulation
- · caulking/putties
- ceiling tiles and lay-in panels
- · cement pipes
- · cement siding
- · cement wallboard
- construction mastics (floor tile, carpet, ceiling tile, etc.)
- · cooling towers
- decorative plaster
- · duct work flexible fabric connections
- electrical cloth
- electrical panel partitions
- electrical wiring insulation

- · elevator brake shoe
- · elevator equipment panels
- fire doors
- · fireproofing materials
- flooring backing
- · heating and electrical ducts
- · high temperature gaskets
- · HVAC duct insulation
- · joint compounds
- pipe insulation (corrugated air-cell, block)
- roofing felt
- · roofing shingles
- · spackling compounds
- sprayed-on insulation
- taping compounds (thermal)
- textured paints/coatings
- thermal paper products
- · vinyl floor tile
- · vinyl sheet flooring
- · vinyl wall coverings
- wallboard

Asbestos fibres are particularly dangerous when friable and exposure could have potentially dangerous repercussions for workers. Occupational diseases specifically attributed exposure to asbestos to have a latency period of 20 to 40 years so there are relatively few immediate indications of health related incidences after having been exposed.

Asbestosis and mesothelioma can only be contracted after significant exposure to asbestos and are death sentences for workers who are diagnosed. To date there is no cure or treatment that will eradicate these diseases.

DEFINITIONS

Asbestosis: a devastating lung disease found in people who are chronically exposed to asbestos.

Mesothelioma: cancer of the lining of the lung or the pleura and can only be contracted by exposure to asbestos.

Pleural Plaques: calcification indicates exposure to asbestos demonstrated scarring in the lining of the lungs due to asbestos exposure a potential precursor to other asbestos related diseases.

ASBESTOS REGISTRY

Workers who have been exposed to more than 1,000 hours of friable asbestos have the right to have their names placed on the Ontario government's asbestos registry. This registry will generate correspondence between the Ministry of Labour, the worker's doctor and the worker regarding the type of testing that physicians should initiate annually because of the asbestos exposure. For more information, please contact OSSTF/FEESO Provincial Office, Protective Services Division.

ASBESTOS IN VEHICLE BRAKE REPAIR

Asbestos was historically used in friction materials used in brakes and clutches in vehicles. As the health risks became apparent, the use of asbestos in all applications declined from the 1980s onward. The manufacturing of asbestos brake pads in Ontario ceased according to the Ontario Ministry of Labour. For many years it was considered that asbestos containing materials were no longer used in automotive friction applications.

Approximately \$2.6 million dollars of brake pads containing asbestos entered Canada during 2011 according to Statistics Canada data. These materials are sold as aftermarket replacement products and may pose a risk to anyone working on brakes particularly auto mechanics and transportation technology teachers.

Asbestos is a hazardous material and can pose dangers if not properly dealt with during maintenance and repair of friction related materials. Microscopic asbestos fibres can cause respiratory problems, mesothelioma, and lung cancer. Symptoms can often take between 10 to 40 years between the initial exposure and the appearance of disease.

Brake repair may be classified as Type 1 or Type 2 operations (which are specifically covered under Ont. Reg. 278/05) if the repair meets certain requirements. If the brakes are cut, ground, sanded, or otherwise dealt with in a manner that might cause dust particles to be produced whether done by hand tools or by use of power tools. A list of recommendations for dealing with such work includes the wetting of parts before work, using wet cloths to remove dust before work begins, and the use of personal protective equipment and high efficiency particulate aerosol filters. The complete list is available on the Ministry of Labour website which can be searched by entering the title above in the search window.

More information can be obtained by searching the subject at the Ontario Ministry of Labour website; further information is contained in "A Guide for replacing Brake Drums, Shoes or Pads" produced by Health and Safety Ontario and by referring to Workplace Safety and Insurance Board "fact sheet on asbestos-related disease."

BIRD AND BAT DROPPINGS

There is some risk of fungal disease wherever there are large populations of roosting birds or bats. Generally people with weakened immune systems, the elderly and infants and persons with a history of respiratory illness are at greater risk if exposed to the fungal spores present in bird or bat excrement.

Histoplasmosis

Histoplasmosis is a disease that is transmitted to humans by airborne fungus spores from soil contaminated by bird and bat droppings. Symptoms may be mild and similar to the flu or may not be present at all. Always consult your physician if you think you have been exposed.

Cryptococcosis

Cryptococcosis begins with a lung infection after a person has inhaled cryptococcis neoformans spores. Pigeon droppings appear to be the most important source of the fungus in the environment. Medical care should be sought if dried excrement has been disturbed thus making the spores airborne and respiratory difficulties are noted.

Hazard Control

Ideally the best method of limiting potential exposure to the airborne spores would be to eliminate the source of the excrement. Mechanical anti-roosting systems consisting of angled and porcupine wires are the most efficient repellents but also require some occasional maintenance. Live trapping and attempts to destroy the animals is often ineffective and may require special permits. Attempts should be made to make the area unattractive to the birds or bats or to provide them with alternate roosting areas. Bat houses strategically placed have been found to provide bats with alternate roosting areas.

Removal of Bird and Bat Droppings

Work practices and dust control measures that eliminate or reduce dust generation during the removal of the excrement should be utilized. Before shovelling or sweeping dry dusty material, the excrement should be lightly wetted down with water to reduce the amount of dust aerosolized during removal. Once the material is wetted and collected it should be double bagged into sealed plastic garbage bags. If there are high volumes of bird or bat manure, a truck mounted vacuum system with a HEPA filter may be more efficient.

Removal Precautions

Workers should also consult employer protocols for removing potentially contaminated materials prior to beginning of the removal. Generally the following precautions should be observed:

- Clean-up should be done by healthy individuals.
- Wear an appropriate respirator that can filter particles as small as 0.3 microns.
- Wear disposable gloves, hat, coveralls and boots.
- During the clean-up, seal heating and cooling air ducts or shut the HVAC system down.
- Moisten the droppings with a light mist of water to keep dust and spores from becoming airborne.
- · Put droppings into sealed plastic garbage bags and double bag.
- When finished and while still wearing respirator, remove disposable protective clothing and place it in the plastic bag.
- Shower at the worksite after clean-up.
- · Check with local government to verify disposal method.
- Modify the area to prevent or discourage birds or bats from re-establishing the roost.

CARCINOGENS

A carcinogen can be defined as being any agent (chemical, biological, or physical) which can cause the growth of malignant tumours. Most of us are aware of chemicals such as benzene and products such as asbestos which can cause cancer, other factors are exposures to ionizing radiation such as ultraviolet light and radioactive materials. It is now known that some viruses are also known to cause cancer growth, such as human papillomavirus or hepatitis C.

In general, cancerous growths arise from damage to DNA which results in abnormal tissue formation. There is no safe level of exposure to carcinogens however, not everyone who is exposed will develop cancer. Although we speak of cancer as being a single disease, there are a large number of different types of tumour.

The best way of dealing with carcinogens is to limit exposure to the agent. This can be done by substitution of the agent by a safer product, isolating the agent from the environment, engineering controls which are intended to reduce the exposure such as increased ventilation, screens to block ionizing radiation, and finally personal protective equipment.

Substitution is the preferred method of control as non-carcinogenic materials are used to replace material known to be carcinogenic. Examples include removal of asbestos insulation and replacement with safer insulating materials, or using water based paints to reduce exposure to organic solvents in oil based paints.

Isolation involves putting a barrier between the carcinogen and the remainder of the environment to limit the exposure of the workers without actually having to remove the product. For example an enclosure can be built around asbestos insulated pipes to prevent damage and reduce the concern about air quality.

Local ventilation can be used to remove carcinogens from the general air supply. An example might be use of a laboratory fume hood which removes air to the outside rather than back into an air recycle system.

Personal protective equipment can reduce levels of exposure. Rubber gloves, aprons, and appropriate breathing masks can limit exposure to carcinogenic dust and solvents. Sunblock and appropriate hats can reduce one's exposure to ultraviolet light from the sun. Inoculations and good hygiene practices can lower the risk of biological agents which may cause cancer.

There are a number of rating systems in use which can help define the risk of causing cancer posed by the agent. The highest level of warning is for materials known to have caused cancer in human such as tobacco smoke, asbestos, and certain chromium salts. The next lower level is for materials which are known to cause cancer in animals and which may cause human cancers. Lower levels include materials which have not been found to cause cancer but are very similar to products which are known that a warning and caution is appropriate.

New information is being developed from on-going research and products thought generally safe many years ago are now recognized as hazardous; it is prudent to check the MSDS regularly to see if any new information or warning has become available.

One very dangerous aspect of many carcinogens is that there are often no immediate symptoms of exposure and often a latency period of 10 to 30 years can occur between exposure and development of cancer.

Many changes have been made in workplaces, often through legislation to reduce the risk of exposure to carcinogens in the workplace however, prudence is still required. Further if you suspect you have been exposed to a carcinogen it is important to document the situation and inform you medical practitioner, your supervisor, and your Joint Health and Safety Committee representative.

CEILINGS: SUSPENDED/DROP CEILINGS

Suspended or drop ceilings are secondary ceilings that create a physical open space that is often used for HVAC duct work, open air plenums, network, electrical, communication wiring and plumbing. Each of these create potential hazards for anyone performing work in this open space. However, in buildings constructed during and before the mid 1970s the most notable hazard is asbestos, contained in fireproofing material, insulation and some ceiling tiles that may still remain in place today. Proper protection is essential prior to beginning any type of work in these areas, it is essential that workers consult the Asbestos registry/logs before working in open air plenums or above ceilings.

Gaining access to these areas presents a potential hazard on its own. Standing on the top step of a step ladder to reach or perform work above the ceiling can cause a fall from heights. Relying on T-bars for support or balance should never be considered as it may cause additional stress on the entire ceiling creating a risk for it to collapse. They may already be overloaded by the weight from light fixtures, excess wiring laying on top, weakened or missing hangers. Improper installation of light fixtures, smoke detectors or fire suppression systems may fall exposing coworkers to potential risk as well. Moisture from duct work, leaky roof, or piping can drip down onto ceiling tiles, overtime the tile will absorb the water, this can cause mould, tiles to rot or fall. If work required above the ceiling is over 3 metres (10 feet) or falling into machinery, onto a hazardous substance or through an opening on a work surface is present, fall arrest equipment is required to be worn and properly anchored, tied off while work is completed.

Asbestos insulation deteriorates over time, becomes friable, resulting in a fine layer of dust that once settled can be found lying upon any surface above the ceiling tile such as pipes, ducts, light fixtures, it may be disturbed by simply removing a tile. Without prior knowledge of this potential risk, workers entering suspended ceilings are at risk from inhalation of this dust.

Electrical hazards may be present where there are open junctions, faulty wiring, improper upgrades, worn cables in low light, overheating light fixtures, wiring in hidden locations, abandoned circuits that may have been left energized. While these may not cause electrocution, they may cause electrical burns or shocks that create the potential for the loss of balance and a fall from heights. In the event of wiring shorting out and burning, toxic gasses can be present, and if the area is used as fresh air return system for the HVAC systems these gasses can be circulated.

Above ceiling areas can create residences for unwelcomed guests such as mice, rats, bats, bees and wasps. This may create the potential for exposure to fecal or decomposing animal matter, bites to the hand from surprised rodents, as well sting hazards from bees or wasps. Attempted chemical removal of these unwelcomed guests may have resulted in spilled, forgotten pesticides/poisons becoming a potential hazard.

Other hidden potential hazards above suspended ceilings may include unmarked hot water pipes that present a potential for burns. Forgotten tools, leftover parts or equipment, fallen duct work, excess wiring lying on T-bars or tiles may fall on workers or co-workers while moving tiles to gain access. Sharp or ragged edges on T-bars, hangers, ceiling fixtures or duct work can cause abrasions, minor or major cuts.

Prior to accessing this potentially hazardous area, determine what hazards may be present from renovations or any work that has been done above the ceiling, consult asbestos logs, other workers for historical information and take appropriate precautions. Also ensure proper lighting is available while working in these low light or dark areas as it is not only frustrating but dangerous.



CHEMICALS

Exposure to chemicals in the workplace can cause harm to workers in many different ways. The most common ways for chemicals to enter the body are:

Inhalation: Workers knowingly or unknowingly inhale the chemicals.

Absorption: Chemicals enter the bloodstream through contact with the skin.

Ingestion: Workers may absorb chemicals while eating or drinking or even rubbing eyes, mouth, or nose with hands contaminated with chemicals. Alternately contaminated surfaces could result in hands unknowingly coming into contact with chemicals or food, or snacks could be contaminated by contact with contaminated surfaces.

Injection: Chemicals can enter the body through puncture of the skin.

The results of chemical exposure can be acute and can happen quickly after exposure to a chemical or chronic occurring over a period of time during which exposures are common or even latent in which the exposure to chemical causes no symptoms, often many years may pass before the first symptoms of the exposure become evident.

In schools, science labs, art rooms, and technological areas tend to have the most chemicals in comparison to other areas of the school. But cleaning products, paints, and other building products may continue to give off chemicals to the environment for a period of time after use or installation. Further agricultural chemicals, pesticides and insecticides used in and around the school may contribute to the presence of chemicals in the schools environment.

CONTROLS

There are many ways of controlling the exposure to chemicals in the workplace. The best way is to eliminate the hazard at the source by removing hazardous chemicals from the school either by substitution with a safer product for the purpose or eliminating the use of the product entirely. The second best way to reduce exposure is along the pathway either by administrative or engineering controls. Administrative controls are rules put in place to control exposure; an example might be not painting inside the school except when the building is not occupied by many people. Administrative controls might also limit concentration or quantity of the products being used. Engineering controls can help to eliminate some of the risk by providing fume hoods to extract noxious vapours in a science preparation room or in a technology room. Not as effective as other controls, another important way to limit exposure is through use of personal protective equipment such as rubber gloves, aprons, and protective eye wear.

Workers in Ontario have the right to know about the hazards in the workplace and this knowledge is very important in controlling exposure to chemicals. The WHMIS system is intended to help workers know the hazards of the various products which they use in the workplace and how to protect themselves from those hazards. WHMIS training is mandated by laws and updates are required from time to time. In fact, Health Canada will change the system to use GHS to identify types of hazards as of 2015 (See Controls Section under Global Harmonized System of this guide). Unfortunately many OSSTF/FEESO members do not receive adequate training or fail to use the information provided for them for a variety of reasons. Part of WHMIS programs requires that WHMIS information must be less than three years old and it must be updated whenever new information becomes available. Even if you have been using a product for many years, it is worthwhile consulting the WHMIS information as formulations may have changed and new toxicological information has been discovered.

Products should never be brought into the school without material safety data sheets (MSDS) being available. Exposure to the chemical could produce unexpected results to the person or to another staff member without the information about how to deal with the exposure.

Another consideration for OSSTF/FEESO members is that products used in a classroom may enter the general air circulation system and affect others in the school; we need to be aware that in a closed environment such as a school, our actions can affect others.

STORAGE AND USE

Chemicals and products containing chemicals need to be stored and used properly to minimize risk and maximize benefit. However, due to time constraints and very busy schedules, chemicals are often not properly put back into the correct area for storage and potential hazards can be easily created by misplacing chemicals when in a rush.

The information on the MSDS for chemical products contains valuable information and the information is easier to read and understand before the product is used rather than trying to find how to deal with a spill after the spill has occurred. Product information often includes the best ways to use the product and suggested dilutions to increase the utility of the product and to lessen the risk of use of concentrated materials.

Many products have a known shelf life and degrade over time; it is important to know which products degrade and ensure that only the quantity which will be used in the near future be purchased at any time. Sometimes the product loses its reactive characteristics and no longer functions, however, some products degrade in a fashion which can create substantial hazards; information is usually available on the MSDS.

CHEMICALS STORAGE AND USE

Before using a chemical, ensure you have read the MSDS and know what to do in case of a mishap.

Follow the instructions when decanting, diluting or opening a chemical container.

Insure there is adequate air flow if using a fume hood and ensure the fume hood is not used to store chemicals or waste containers as containers in the fume hood can dramatically alter air flow.

Ensure any excess chemicals are disposed of properly.

Chemicals should never be left in an unlabelled or mislabelled container. Always seal the container as soon as possible as many chemicals undergo reactions with ambient air.

Ensure the required personal protective equipment (PPE) is available and in good working condition; report any deficiencies and obtain working PPE.

If someone is exposed to a chemical, ensure a copy of the MSDS is available to the person or medical professional attending that person. Always restore the chemical to the proper spot in the chemical storage area or cabinet; numerous hazards are created when chemicals are placed in the wrong location.

CONFINED SPACE

Confined Space (Regulation 632)

A confined space is defined as a fully or partially enclosed space,

- that is not both designed and constructed for continuous human occupancy, and
- 2. in which atmospheric hazards may occur because of its construction, locations or contents, or because of the work that is done in it.

The employer is required by regulation to develop a confined space entry program that includes: assessment and entry plan, hazard recognition and training, entry permits, on-site rescue procedures and equipment, PPE clothing and devices and an attendant. Provisions must also be made for protecting against unauthorized entry into the confined space.

CONTRACTORS

The Occupational Health and Safety Act applies to all workers within an educational worksite. Outside contractors are often employed to do such work as painting, plumbing, electrical work, construction or building repair. Employers must ensure that the work being done is completed in a manner that is consistent with the OHSA as well as being in accordance with the employer's own policies and procedures.

If an OSSTF/FEESO worker believes that there are contraventions by an outside contractor, the worker should inform the supervisor and contact the union Health and Safety Representative for further clarification.



DESIGNATED SUBSTANCES

The Occupational Health and Safety Act allows for certain toxic substances to be specially designated. Before 2009, each designated substance was dealt with in a separate regulation constructed for the control of these substances in the workplace. At the present time, the following substances have been designated:

- acrylonitrile
- arsenic (may be present in chemistry labs)
- asbestos (see pg. 13)
- benzene (may be present in chemistry labs)
- · coke oven emissions
- · ethylene oxide
- isocyanates (may be present in paints used in auto-body shops)
- lead (may be present in old paint, chemistry labs)
- mercury (may be present in old thermometers, thermostats, chemistry labs)
- silica (may be present in processing of clay, cement, glass in art or tech facilities)
- · vinyl chloride

In 2009, there was a consolidation of these separate regulations into Regulation 490/09 Designated Substances. Other toxic substance may have exposure limits and control programs outlined in Regulation 833 Biological or Chemical Agents, Control of Exposure to.

The Designated Substance regulation will apply if the following conditions are met:

- · The substance is present.
- Exposure is likely if the worker can come in contact with the substance in any form (i.e. solid, liquid, dust, gas, vapour, fume or mist).
- None of the exemptions listed in the Designated Substances Regulation apply.

Where a regulation applies to a workplace, the employer must conduct an assessment to determine whether the health of a worker may be affected by exposure to the substance in consultation with the Joint Health and Safety Committee.

If the assessment shows that a worker is likely to be exposed to the substance and that health may be affected, a control program must be established. The regulation for each substance details what the control program is to include.

Any control program must have provisions for:

- Engineering controls, work practices and hygiene practices and facilities to control the exposure of a worker to the substance.
- Methods and procedures to monitor the concentration of the substance in the workplace and the exposure of the worker.
- Personal records of the exposure of a worker to the substance at the workplace to be maintained by the employer.
- Medical examinations and clinical tests of a worker, and record of medical examinations and clinical tests of a worker to be maintained by a physician who has examined the worker or under whose direction the clinical tests have been performed.

As with any control program, the best control for a toxic substance is at the source. The employer and the JHSC should evaluate whether there is a safe material to substitute or if it is necessary to continue using the substance, then the control system must be implemented and monitored.



INDOOR AIR QUALITY

Indoor air quality refers to the total indoor quality of the air we breathe at work. Common symptoms arising from poor indoor air quality include:

- · dry throat
- · headache
- · skin irritation
- · itchy eyes
- · dizziness
- · bleeding nose
- · fatigue
- · sinus congestion
- · flu-like symptoms

Joint Health and Safety Committee representatives should request workplace testing by a hygienist to monitor indoor air contaminants if other explanations for poor air quality cannot be found. All workplace testing should be conducted during the busiest time of the day or shift and when normal activities are taking place to ensure quality testing results. Carbon dioxide testing alone may not be adequate if the cause of the air quality complaint is chemically related. Worker safety representatives have the right to be present when all workplace testing is conducted and the employer must provide the release time to attend and ensure that there is adequate ventilation.

NB: If you develop any of the symptoms noted above report the problems in writing to your Health and Safety Representative and your supervisor.

Common causes of poor air quality

- Mould, fungi, plant substances that are airborne.
- Vapours, fumes, gases and particulates from photocopiers, printers, new furniture, renovation/maintenance processes such as caulking and roofing etc.
- Emissions from new carpets, paints, varnishes, and Volatile Organic Compounds (VOC).
- Tobacco smoke, carbon dioxide in exhaled air, perfumes, etc.
- Outside air contaminants entering the building.
- · Inadequate humidity in forced air heated areas.

An easy way to reduce exposure to VOCs and chemical contaminants in the workplace is to practice green purchasing practices and substituting products for less hazardous ones. Warehousing of new products for several months to allow off gassing of chemicals can also be beneficial to reducing exposures. Approach your JHSC committee to have a recommendation made to your employer to accomplish this.

Ventilation

Section 19 of the Occupational Health and Safety Act Ontario specifically outlines employer responsibilities regarding providing adequate fresh air to the workplace. It reads as follows:

- (1) General indoor ventilation adequate to protect the health and safety of a worker shall be provided by natural or mechanical means.
- (2) A mechanical ventilation system shall be inspected every six months to ensure it is in good condition.
- (3) The inspection referred to in subsection (2) shall be carried out by a person who is qualified by training and experience to make such an inspection.

- (4) The person carrying out the inspection shall file a report on the inspection with the employer and with the joint health and safety committee or health and safety representative, if any.
- (5) A mechanical ventilation system
 - (a) shall be serviced and have maintenance work performed on it as frequently as recommended by the manufacturer; and
 - (b) shall be serviced, have maintenance work performed on it or be repaired when a report referred to in subsection (4) indicates it is necessary to ensure the system is maintained in good condition. O. Reg. 67/93, s. 19.

Machinery and equipment which releases hazardous vapours or particulate matter into the workplace should have local exhaust provided at the source of the contamination. Check manufacturer's specifications manuals for the specifically recommended procedures to control the hazard and follow up with any concerns or questions that you have by contacting your Joint Health and Safety Representative.

There are two types of ventilation:

Dilution Ventilation (e.g., HVAC system)

- Brings in outside air and exhausts contaminated air.
- Usually used when the contaminant is relatively non-toxic or there are a large number of sources (body odour, perfume, etc.).

Local Ventilation

- A good example of this type of ventilation would be a fume hood or an exhaust fan in a technical area.
- · Exhausts contaminants before they reach the general air.
- Usually used when direct worker exposure is possible.

Members who work in portable classroom settings are particularly at risk for indoor air quality problems as portable classrooms often have inadequate ventilation and high relative humidity that encourages mould and mildew growth. This growth may not be outwardly visible and may hide behind walls or ceiling tiles. Contact your Health and Safety Representative if you have concerns. The most common way to eliminate mould growth is to use a ten per cent solution of household bleach to disinfect the area but this should only be done by those who are trained to use it safely using the appropriate personal protective equipment (chemical resistant gloves, splash goggles and respirator).

If your work space comes with ventilation or exhaust fans it is important to use this equipment in the manner it was intended as it is usually in place to control a specific hazard or to simply improve general overall air quality. Ask your supervisor for training so that you may use the equipment properly where individual worker control is available.



INDOOR AIR QUALITY OCCUPANT INTERVIEW

Building Name:		Work Location Room No(s):				
Completed by:		Title:				
Date:						
SYMPTOM PATTERNS What kind of health concern	ns or discomfort are you	experiencing?				
□ head □ nausea ache □ dizziness □ tiredness □ irritation of throat □ irritation of eyes □ irritation of nose □ skin irritation □ other: Are you aware of other co-ware	□ breathing problems □ coughing □ sneezing □ wheezing □ sinus congestion □ shortness of breath □ irritation of nose □ blurred vision	pain and discomfort in: back neck hands shoulders wrist joints a concerns? Yes No				
-		particularly susceptible to environmental etc.) Do not answer this if you are not				
TIMING PATTERNS When did your symptoms s mornings afternoon Do they go away? If so, whe	s 🗖 all day long 🗖 n	o noticeable patterns				
When are they generally worse? (i.e. seasonal, certain days of the week)						
-	•	weather events, temperature or humidity around the same time as your symptoms?				

SPATIAL PATTERNS Where do you spend most of	your time in the building?	
How long have you been at th	e current work location?	
When did you first notice thes	se health concerns?	
☐ in my work area ☐ in the	erience health concerns or discomfore lavatory in the lounge in the lounge	
When do you experience thes ☐ only at work ☐ at home		
ADDITIONAL INFORMATION Do you have any observations help explain your health conc	about building conditions that migherns?	t need attention or might
□ air circulation □ drafts □ humidifier/dehumidifier □ air conditioning □ machinery/equipment □ renovations □ particulates, dust □ chemicals used □ Other:	□ temperature □ humidity □ noise □ illumination/lighting □ smoking □ new carpeting, furniture □ cleaning and maintenance □ plants or animals in the room	☐ foul odours ☐ water damage ☐ irritants in air ☐ outdoor contaminants ☐ overcrowding ☐ perfumes, deodourizers ☐ carpet, draperies
	ention for your health concerns? doctor say?	
☐ No ☐ Yes How many t	arly or miss work because of your hotimes in the past month? days were you away from work?	
Do you have any other commo	ents?	

Thermal Comfort

Regulating temperature and humidity is also important in maintaining a healthy workplace. Section 29 of the Industrial Regulations under OHSA indicates a lower temperature limit: most indoor workplaces must maintain a minimum temperature of not less than 18°C (64°F).

Unfortunately there is not a legislated upper temperature limit but the Ministry of Labour still expects the employer to take precautions. OHCOW has developed a Humidex Based Heat Response Plan which employers can use as a guide for best practices for working both inside and outside. www.ohcow.on.ca

Health Canada, the CSA and ASRAE have guidelines and standards for temperature and humidity since high humidity above 70 per cent can assist in mold growth and low humidity below 20 per cent can cause respiratory problems and the build-up of static electricity.

Even when working outdoors the employer should take every precaution reasonable to mitigate temperature extremes. Often the local health unit will determine if the wind chill is low enough to mandate indoor recesses. The employer should also be cognizant of smog advisories for outdoor workers in warm weather.

INFECTIOUS DISEASE

Workers in the education sector are exposed to infectious diseases that are caused by pathogens or tiny micro-organisms such as bacteria and viruses. Knowing how diseases are transmitted enables the proper safety precautions to be established.

The most common way for infectious diseases to enter the body is through:

- lungs—inhalation
- skin—absorption/injection
- digestive tract—ingestion

When an infected person exhales, sneezes or coughs, droplets of mucous that contain pathogens are released. These may come into contact with the eyes, nose or mouth of another person resulting in infection. As the droplets evaporate the pathogens may remain suspended in the air for long periods of time and could be inhaled.

Examples of bacterial diseases include tuberculosis, pneumonia, salmonella, and tetanus. These can be transmitted where there is contact with infected people and inhalation of airborne droplets in crowded conditions, poor hygiene and sanitation, or food that has been improperly prepared and cooked.

Examples of viral diseases include HIV, hepatitis A, B and C, influenza, rubella and cytomegalovirus. Antibiotics have little effect on viral infections and immunization is recommended.

OSSTF/FEESO strongly recommends that women of childbearing age who are contemplating becoming pregnant discuss job duties and their level of immunity with their health care provider prior to becoming pregnant.

UNIVERSAL PRECAUTIONS/BODY SUBSTANCE PRECAUTIONS

Education workers may come into contact with infected blood or bodily fluids either through direct contact with an individual or through accidental contact with a contaminated object such as a needle or sharp objects. Education workers must treat all blood and bodily fluids as potentially infectious and practice infection control procedures to prevent the spread of infectious disease.

Universal Precautions are guidelines for the control of infectious disease when contact with blood or certain bodily fluid is anticipated. Body Substance Precautions recommends that precautions be taken with blood and all bodily fluids. Bodily fluids include blood, any fluid containing blood, semen, vaginal secretions, feces, urine, vomitus, and nasal secretions.

The hands are considered to be the most common method of transmitting infectious disease in the workplace. Once the hands come into contact with an infectious agent it may be spread to other workers or to an object where it can gain access to the body and cause harm.

It is essential that education workers wash their hands frequently and properly and that they are trained in the correct use and disposal of personal protective equipment such as gloves, gowns and masks.

The employer, in conjunction with the JHSC must have written policies and procedures for the control of infection that provides maximum protection for the worker.

All education workers must be educated about potential hazards and the employer's policy and procedures to reduce exposure of all workers to infectious diseases in the workplace. This policy should identify all potential hazards and provide written procedures for controlling the hazard.

Effective policies and procedures will include the following:

- Anticipates hazards and devises methods of control that provide maximum protection for the worker.
- Supplies appropriate disposable gloves, gowns and possibly eye
 protection must be provided where it is likely that the worker
 will come in contact with blood or bodily fluids, or whenever the
 worker feels it is necessary.
- Identifies good hygiene practices such as frequent and thorough hand washing with soap and water before and after all procedures; Please note that antibacterial soaps do not stay in the skin long enough to destroy pathogens.
- Where the need is anticipated, disposable ventilation devices should be made available.
- Sharps such as EpiPens should be disposed of in puncture resistant containers and workers should never reach into these containers.
- Materials that have come into contact with blood and bodily fluids should be placed in impervious bags and labeled.
- All potentially contaminated surfaces should be cleaned with a solution of 1:10 household bleach or other approved germicide.
- Education regarding hazards and training in the use of protective equipment.
- Require all workers who may come into contact with blood or bodily fluids to practice precautions.

EPIPENS

Sabrina's Law, which came into effect on January 1, 2006, requires every school board to establish and maintain an anaphylaxis policy and procedure. Anaphylaxis is a severe allergic reaction that can lead to rapid death, if untreated. School administration must ensure that staff are regularly trained on dealing with life-threatening allergies which includes EpiPen training. Epinephrine (usually carried in the auto-injector EpiPen) is used to treat the symptoms of the allergic immune reaction. EpiPens are sharps and need to be administered properly to avoid needlestick injuries. EpiPens are to be stored in an easily accessible location or carried by the student/staff member. A lockable cabinet for disposing of sharps is located in each school and staff are to be notified of the location. A process must be in place to dispose of and replace sharps containers when full.

MEDICAL PROCEDURE

Workers who work directly with a student who is taking medication should be made aware of the dosage, frequency, any special equipment required and any special instructions for handling and storage of the medication. Any changes in dosage or type of medication should be communicated to the appropriate team members. A worker who may come into contact with a student who is taking medication should be made aware of any adverse effects the medication may cause. The worker should be provided with the appropriate strategies or procedures to deal with this situation. Training in appropriate procedures for the administration of medication should be provided by the appropriate health care professional.

PROFESSIONAL ASSESSMENT AND SUPPORT SERVICES

The results of all professional assessments should be obtained and shared with all workers who will have direct contact with the student. It may be necessary for the employer to initiate an assessment of a student in order to ensure the safety of workers.

The appropriate support services must be allocated. This may include psychological counselling, speech pathology, occupational therapy and other services as may be determined.

SPECIAL TRAINING

Where a specialized level of training is deemed necessary, it must be provided by the employer, at the employer's expense, and during regular working hours. Examples of specialized training may include, but are not limited to, sign language, safe lifting procedures, toiletting, or any procedures that do not contravene PPM 81. A chart outlining the designated health support services responsibilities from PPM 81 is provided on page 33.

EFFECTIVE HAND WASHING

The most effective way of preventing the spread of diseases such as the common cold, influenza and hepatitis A is to use proper hand washing techniques. Use the following steps:

- · remove all jewelry
- · use warm water
- use regular soap and lather well (it is not recommended to use anti-bacterial soap)
- scrub your hands, fingers, wrists and forearms paying particular attention to the nails
- · rinse thoroughly
- dry hands with single use towels or hot air dryer

MODEL FOR PROVISION OF SCHOOL HEALTH SUPPORT SERVICES			POLICY/PROGRAM No. 81			
SUPPORT SERVICE	ADMINISTERED BY	PROVIDED BY	TRAINING & DIRECTION	CONSULTATION		
1. Oral Medication	Pupil as authorized or	Pupil	Attending Physician	Local Board of Health		
	Parent as authorized or	Parent	Attending Physician	Local Board of Health		
	Aide or other personnel	School Board	School Board/ Physician	Local Board of Health		
2. Injection of Medication	Pupil as authorized	Pupil	Attending Physician	Local Board of Health		
	Parent as authorized	Parent	Attending Physician	Local Board of Health		
	Health Professional	Ministry of Health	Ministry of Health	School Board		
Catheterization Manual expression of bladder/stomach Postural drainage/ suctioning	Health Professional	Ministry of Health	Ministry of Health	School Board		
4. • Lifting and positioning • Assistance with mobility • Feeding • Toiletting	Aide or other personnel	School Board	School Board and Ministry of Health	Ministry of Health		
5. A. Physio/Occupational:						
Intensive Clinical (treatment)	Qualified Therapist	Ministry of Health	Ministry of Health	Ministry of Health		
General maintenance exercises	Aide	School Board	Ministry of Health	Ministry of Health		
B. Speech: • Speech Pathology (treatment)	Speech Therapists/ Pathologists	Ministry of Health	Ministry of Health	Ministry of Health		
Speech correction and remediation	Speech and Language Teachers	School Board	School Board	Ministry of Health		
6. All services in children's residential care/treatment facilities	Aides/Health Professionals	Ministry of Community and Social Services	Ministry of Community and Social Services	Ministry of Health		

INFECTION CONTROL

Increasing evidence shows that some viruses (i.e., hepatitis B, HIV, etc.) can be spread to workers through tiny breaks in the skin and mucous membranes (eyes, nose, and mouth). This could occur through exposure to blood or bodily fluids of an unsuspected carrier of the virus.

OSSTF/FEESO members should treat all blood and bodily fluids as potentially infectious. To ensure that the risk of infection is minimized, all staff should practice infection control procedures known as Universal Precautions and the Body Substance Precaution System. The employer should require the practice of Universal Precautions and provide training.

This system includes:

- The provision of personal protective equipment such as gloves, gowns, and other necessary equipment for the protection of the member and guidelines for their use.
- · Hand washing guidelines.
- · Procedures for discarding contaminated trash.
- Specific procedures for cleaning up spills of blood and bodily fluids using an approved disinfectant.

It is the supervisor and worker's responsibility to anticipate, provide and use protective measures. When deciding what protective measures are appropriate it is important to ask yourself if the student's behaviour will increase the risk of exposure to bodily fluids and obtain help if required.

Pregnant members, or those who may become pregnant, should be completely familiar with and particularly careful to observe all precautions to minimize the transmission of communicable diseases (e.g., TORCH infections such as rubella or herpes virus which may cause malformations).

FIFTHS DISEASE

Fifths disease is also called slapped cheek syndrome or parvovirus infection. Most adults in Canada (60 per cent) are immune to it as they were exposed to the virus as a young child. It is most common to get the disease between the ages of three and seven.

In children, fifths disease may cause mild respiratory symptoms, rash and perhaps a mild temperature. In adults there may be no symptoms or they may experience a sore throat, headache, itching or fever.

There is some risk for pregnant women in their first trimester so it may be prudent to obtain a blood test to check for immunity if working with children.

BED BUGS

Bed bugs are parasitic insects that feed exclusively on blood. In the 1940s, they were thought to have been eradicated but likely due to pesticide resistances, they have enjoyed a resurgence.

Bed bugs cause skin rashes but are not known to cause any disease though bites could become infected.

Infested items such as clothing and backpacks can assist in the transportation of bed bugs. Bed bugs are usually nocturnal and often lodge in dark crevices but they can survive without feeding for 100–300 days. They do not live on human bodies.

LICE AND SCABIES

Frequently, OSSTF/FEESO members will come into contact with scabies and/or lice. Infestation may cause anger, embarrassment and misunderstanding. Lice and scabies do not spread disease, are not a hazard to your health, and are not a reflection of personal hygiene. Anyone can get them. The first sign of an infestation is usually itching. The following sections are designed to help members recognize what scabies and lice are and what treatment is available.

Lice (pediculosis) are barely visible wingless insects that are approximately the size of a sesame seed. The adult louse is hard to see because it can crawl and hide in the hair. What are readily apparent are the nits, which are shiny, grayish white teardrop shaped globules, roughly the size of the head of a pin, firmly attached to the hair shaft, usually at the base. Nits tend to be concentrated in the "halo" area of the head (hairline, behind the ears, nape of the neck).

The most common treatment for lice is a pediculicide shampoo, lotion or cream, which can be purchased over the counter or by prescription. These can be harmful if used incorrectly. It is important to discuss their use with your health care provider or pharmacist, read the instructions for use very carefully, and use only as directed. Remember that these are chemicals and you do not wish to leave them on longer than is necessary. A second treatment is required seven to 10 days later to kill any newly hatched lice.

SCABIES

Scabies is caused by the itch mite sarcoptes scabiei, which spreads easily from person to person on physical contact. For this reason it may be necessary to treat more than one member of a household.

Young mites hatch a few days after the female deposits them under the topmost layer of the host's skin. Mite burrows are very thin lines up to half an inch long, sometimes with a tiny bump at one end. Common sites for these burrows are between fingers and toes, wrists, ankles, buttocks, and the genitals. Infestation with scabies can cause intense itching, probably due to an allergic reaction to the mites, which is usually worse at night. The burrows may become inflamed due to scratching. Scabies do not carry disease, however scratching, which can cause breaks in the skin, may lead to a more serious infection caused by other germs.

People with a weakened immune system may develop a severe infestation that can produce large areas of thickened, crusted skin. Your health care provider can provide a diagnosis and will prescribe a cream that will cure the infestation. In severe infestations or for people with a weakened immune system, oral medication may be prescribed.

IF YOU ARE PREGNANT, BREAST FEEDING, OR HAVE VERY YOUNG CHILDREN, IT IS RECOMMENDED THAT YOU CONTACT YOUR HEALTH CARE PROVIDER PRIOR TO USING PEDICULICIDE SHAMPOO, LOTION OR CREAM.

NOISE-INDUCED HEARING LOSS (NIHL)

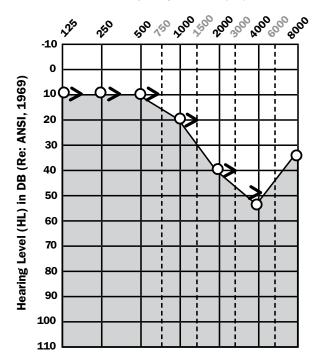
Noise-induced hearing loss (NIHL) is a hearing loss that typically occurs gradually over time due to prolonged exposure to excessive noise levels greater than 85 decibels (dB). It may also occur from short periods of very intense sound, such as explosive blasts.

NIHL is usually a high frequency sensorineural hearing loss (SNHL). Sensorineural hearing loss usually occurs when the nerves that transmit sound information from the ear do not function properly due to injury or disease. SNHL may be congenital (present at birth) or acquired. Noise induced hearing loss and age-related hearing loss (presbycusis) are examples of acquired sensorineural hearing loss.

In cases of NIHL, the hearing loss is typically greatest at 4,000 Hertz (Hz) and is usually similar in both ears. On an audiogram, the resulting configuration has a distinctive notch, sometimes referred to as a "noise notch." NIHL increases most rapidly during the first 10–15 years of exposure with the rate of hearing loss declining over time (in contrast, the rate of hearing loss due to presbycusis, or age-related loss, accelerates over time).

SENSORINEURAL HEARING LOSS AUDIOGRAM

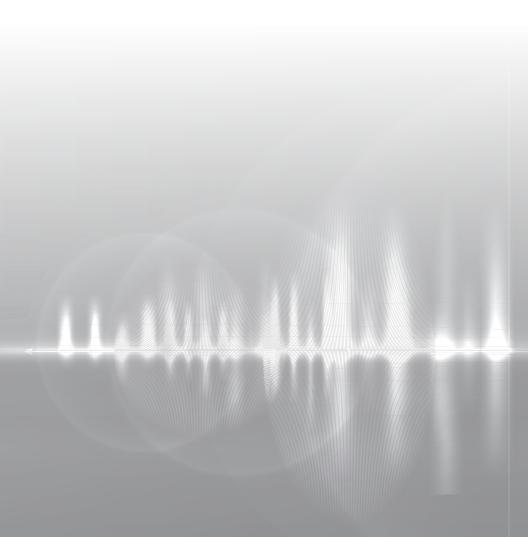
Frequency in Hertz (Hz)



OCCUPATIONAL NOISE-INDUCED HEARING LOSS (ONIHL)

Noise exposure limits for Ontario workers in industrial facilities is 85 decibels (dBA) averaged over an eight hour day (the eight hour time weighted average). This means that for limited periods, a worker may be exposed to higher noise levels as long as the average exposure over eight hours remains lower.

Continuous noise exposure tends to be more damaging than interrupted exposure to noise which permits the ear to have a period of rest and recovery. Noise exposure can be reduced through the use of a variety of hearing protection devices such as earplugs and earmuffs. The risk of occupational noise-induced hearing loss (ONIHL) is low below 85 dB.



PSYCHO SOCIAL HAZARDS

Mental Injuries Toolkit

Do you ever feel:

- Pressured and physically/mentally exhausted because of having too much work to do and not enough time or help to do it?
- Anxious or even ill because of a poisoned work environment or from being bullied, harassed or subjected to threats of violence?
- Uncertain because of the constant threat of layoff or because you don't know where you'll be or what hours you'll be working next week or next month?
- An emotional toll because you don't have the time or resources to care for a client/patient/customer the way you know it should be done?
- Frustration because you have no control over how your work gets done, or because of a lack of support from supervisors or management to do your job?

If you said YES to any of these questions, you will want to read further about how stressors at work (also called psychosocial hazards) affect your mental and physical health, and how we as workers can begin to address these hazards.

A consortium of unions in collaboration with the OHCOW clinics have developed a tool for measuring, identifying and offering solutions to psychosocial hazards in the workplace. If your workplace or bargaining unit is interested in this service you should contact Provincial Office for more information on this project.

See:

- National Standard of Canada for Psychological Health and Safety in the workplace at www.mentalhealthcommission.ca
- · Mental Injury Toolkit at www.ohcow.on.ca

SENSITIVITIES

SENSITIVITIES

Multiple chemical sensitivities (MCS) is a syndrome in which a person feels symptoms due to sensitivity to chemicals in the environment at levels which normally are tolerated by the majority of people. The symptoms people report due to MCS are wide-ranging. They include headache, fatigue, dizziness, nausea, congestion, itching, sneezing, sore throat, chest pain, changes in heart rhythm, breathing problems, muscle pain or stiffness, skin rash, diarrhea, bloating, gas, confusion, trouble concentrating, memory problems, and mood changes.

Incidents of symptoms may be triggered by a wide range of chemicals or mixtures of many chemicals which are called triggers. Reported triggers include tobacco smoke, auto exhaust, perfume, insecticide, new carpet, chlorine, and countless others. Some say that levels of exposure generally considered safe for most people can have an effect on a few. Sometimes poor ventilation in a building allows chemical concentrations to build to the level which causes symptoms to appear in sensitive individuals.

Because education workers work in crowded areas and they may be exposed to numerous low level exposures of chemical agents brought into the environment.

Students and co-workers can unknowingly be the cause of low level exposures. Many people are unaware that they carry scents used in many consumer products such as anti-static dryer sheets and personal care products, such as shampoo or deodorant. Heavy automotive and bus traffic through school yards can elevate the levels of gasoline and diesel exhaust, even the location of a school near a busy roadway can result in some contaminants entering the environment through heating and ventilation systems.

Multiple chemical sensitivity is different from allergic reactions; many of which can be dealt with in other fashions such as use of antihistamines. Generally speaking people with MCS feel symptoms when others in the same environment or physical situation have no noticeable reaction. If you are suffering from symptoms with no clear cause you need to consult with your medical practitioner to determine if you have an allergy, MCS, or there is some other previously unidentified reason for your condition. Results of the medical work may also help to point to strategies to lessen the impact of MCS.

FMFs

Electromagnetic hypersensitivity (EHS) resembles multiple chemical sensitivities (MCS). While MCS is a disorder associated with low-level environmental exposures to chemicals, EHS is a disorder associated with non-ionizing radiation. EMFs (electromagnetic fields) are emitted by almost everything powered by electricity including phones, cordless phones, cell phones, computers, laptops, lights, wireless local area networks (wifi), smart meters, photocopiers, dimmer switches, power bars, and power lines. Although considered safe by most governing bodies, questions regarding EMFs have been raised and it is importance of adopt the precautionary principle in the face of uncertainty. Employers would also have to take additional steps to alleviate the symptoms of anyone with EHS. A survey of EMF fields would be required to locate EMF sources. In most cases the solution is simply to increase your distance from the source. Alternatively you can reduce your time spent near high EMF sources. The best approach of all is to purchase and install electrical equipment with the lowest emissions and reduce the amount of EMFs emitted.

ANAPHYLAXIS

Anaphylaxis is a severe allergic reaction that can lead to rapid death, if untreated. Common examples of potentially life-threatening allergies are certain foods and insect bites/stings. However, these severe allergic reactions may also be caused by medications, exercise, chemicals (especially volatile organic compounds—VOCs, and solvents) and latex.

Any worker who has a severe allergy or carries an epinephrine injector (e.g. EpiPen) should inform the employer and supervisor so proper precautions can be established. Depending on the allergy, employers could put various controls in place such as providing nitrile gloves as an alternative to latex gloves or ensuring all open windows have screens to prevent bees from entering the building.



WORKING AT HEIGHTS

See: (Regulation for Industrial Establishments Reg. 851), (Regulation for Construction Projects O. Reg. 213/91), (MOL Guideline No. 21: Working At Heights | Safety Guidelines for the Film and Television Industry in Ontario)

Risk Assessment

- A competent person should assess the risks associated with any job task and identify, control or eliminate any fall hazards.
- The best option for eliminating a fall hazard is a guardrail system.
 A worker shall be adequately protected by a guardrail system that meets the requirements of the Regulation for Construction Projects or the Regulation for Industrial Establishments.
- When the fall hazard cannot be eliminated, then the hazard shall be controlled by using a fall protection system in accordance with the Regulation for Construction Projects or the Regulation for Industrial Establishments.

Hazard Recognition

The Regulation for Industrial Establishments (including sections 13, 14 and 85) applies after the construction/erection of the set/stage has been completed. Section 85 applies where a worker is exposed to the hazard of falling and the surface to which he or she might fall is more than three metres below the position where he or she is situated. Section 13 sets out the situations where guardrails are required and section 14 outlines the specifications of a guardrail.

The Regulation for Construction Projects (including s. 26.1-26.9) applies to construction projects and including the installation/erection and removal of stages, set, sound systems and lighting systems. The protection in the regulation relating to fall hazards apply where a worker is exposed to any of the following hazards including but not limited to:

- falling from a height of more than 3 metres (approx. 10 feet)
- · falling into operating machinery
- falling into water or another liquid
- falling into or onto a hazardous substance or object
- · falling though an opening in a work surface

Training

The Regulation for Construction Projects (s. 26.2(1)) states: "An employer shall ensure that a worker who may use a fall protection system is adequately trained in its use and given adequate oral and written instructions by a competent person." Section 79 of the Regulation for Industrial Establishments requires that workers required to wear protective equipment such as fall protection equipment shall be instructed and trained in the care and use before wearing such equipment. Among other things, employers shall ensure that:

- Training records are kept, including participants' names and training dates (s. 26.2(2)&(3)).
- The training records are available to Ministry of Labour inspectors on request (s. 26.2(4)).

Rescue Plan

According to the Regulation for Construction Projects (s. 26.1(4)) written rescue procedures must be in place before a fall arrest system or a safety net is used. In addition, a rescue plan should be in place whenever a fall protection system is used. The plan should be posted in a conspicuous place. For more information with regards to Working at Heights please contact OSSTF/FEESO Provincial Office.

WORKPLACE VIOLENCE

Workplace violence is an occupational health and safety hazard that is frequently under-reported. In many cases, workers believe that incidents are minor and are inherent to their work or a result of their own inattention.

Workers in the education sector have been recognized as being particularly vulnerable to violent incidents due to the nature of their jobs, inadequate staffing, lack of training and poor workplace design.

Extensive lobby efforts and significant public outcry after the death of nurse Lori Dupont led to inclusion of the *Occupational Health and Safety Act,* section 32.01 to 32.0.7, in 2005 which specifically deal with violence and harassment in the workplace.

Other legislation such as the Safe Schools Act, the Criminal Code of Canada, the Ontario Human Rights Code, the Workplace Safety and Insurance Act, the Education Act and the Compensation for Victims of Crime Act are all relevant however, the Occupational Health and Safety Act provides the most protection for OSSTF/FEESO members.

The new section came into effect in 2009 and covers important duties and responsibilities for employers as well as specific rights for workers. Employers are now responsible for the development of policies, programs and regular assessments of the workplace to ensure the control of these hazards.

The changes to the Act also expanded on workers' right to know by requiring employers to provide all relevant information (including personal information) in order to protect their health and safety. An extremely important addition to the Act, Section 32.0.4, places additional responsibilities on employers dealing with domestic violence that may impact the workplace and/or lead to workplace violence.

What does all this mean for workers who work with individuals in situations that are potentially hazardous? Section 43.(3)(b.1) clearly states that if a worker believes workplace violence is likely to endanger them, they can refuse work. It is essential that workers report violence clearly defined in the Act, Section 1.(1), and members should be clear in explaining why they are refusing work.

If members exercise their right to refuse unsafe work, they should first inform their supervisor of the hazard while remaining in a safe place. For teacher members only, the *Education Act* requires that you must ensure the safety of students in your care first. The supervisor will investigate in the presence of the member and the member's representative. If the member still feels there are reasonable grounds to refuse, a Ministry of Labour inspector will be called to investigate. No other worker can be assigned pending the inspector's decision unless they are advised of the refusal and the reason for it in the presence of the worker's representative.

For example:

Situation:

An educational assistant is assigned to work with a student who exhibits aggressive behaviour. The educational assistant has received no training in dealing with students who exhibit this type of behaviour and is afraid that she/he is not adequately prepared to deal with the student should an aggressive incident occur. The lack of training in this case would likely endanger her/him.

What to do:

- Inform supervisor about the hazard as per the OHSA (s. 28.(1)(d));
- If the hazard still exists after reporting to the principal, the member may exercise the right to refuse unsafe work as outlined above (s. 43).

Joint Health and Safety Committees (JHSC) can play a pivotal role in controlling hazards and helping to develop an overall strategy for preventing workplace violence. The committees should focus on prevention by assessing situations and making recommendations to the employer for appropriate controls.

Employers should adopt a written policy indicating that they do not expect workers to put themselves at risk from violence while working. There should be written procedures for handling aggressive people and reporting incidents. An incident report should be completed by the worker and these reports should be monitored by the Joint Health and Safety Committee. A Workplace Violence Prevention Program should be developed in consultation with the JHSC.

Proactive intervention strategies and good workplace design are areas of purview for the joint committees to examine and make recommendations. Too often, members do not inform their Health and Safety Representative and this very important issue is not discussed with the people who can make the necessary changes to ensure a healthy and safe workplace design.

Violence Affecting Workers in Schools

The Ministry of Labour has recognized the increase in the number and severity of violent incidents involving student aggression toward those workers employed in the education sector.

OSSTF/FEESO recognizes that violence takes many forms. This document is specifically directed to assist JHSC representatives in the development of a violence prevention program.

With very few exceptions, Bill 86 required the integration of special needs students into elementary and secondary schools. There have been challenges with respect to handling anticipated and actual workplace violence issues.

Although violence can be a criminal matter, the responsibility for the development of workplace violence policies/procedures and their implementation rests with the employer (OHSA s. 32.0.1–32.0.7). In many cases it will be necessary to involve the police in investigations but as workers, we have the right to work without fear. The creation of a locally produced Workplace Violence Prevention Program is seen to be crucial in the protection of workers. Although the Safe Schools Act was created with a view to protecting some workers in the education sector, there has been a significant amount of confusion regarding its application to special needs students. Section 25. (2)(h) of the Occupational Health and Safety Act states that the employer shall take every precaution reasonable under the circumstances for the protection of the worker. This includes protection from violence or the potential for violence from special needs students.

The safety of workers falls under the jurisdiction of the Ministry of Labour who enforce the Occupational Health and Safety Act. To ensure compliance, the Ministry of Labour will write orders against the employer where there are not policies and procedures with respect to special needs students.

A Violence Prevention Program starts with a Violence Policy Statement and then the program is developed, implemented, maintained, and communicated. The employer, in consultation with the JHSC, must develop and implement a comprehensive program to protect all employees from violence. The violence prevention program should include providing for the protection of all workers in an educational setting. This also includes all workers who are contracted to provide service to the employer.

THE ROLE OF JOINT HEALTH AND SAFETY COMMITTEES

The employer, in consultation with the JHSC, must develop and implement a comprehensive program to protect all employees from violence associated with special needs students. The purpose of this section is to provide a resource to assist OSSTF/FEESO Health and Safety Representatives on JHSCs in the development of policies and procedures specifically in the area of a violence prevention program as defined by the Ministry of Labour.

This program must take into consideration any special circumstances in which the worker is required to work. The Violence Prevention Program will take into consideration (but is not limited to) the following elements:

Worker Training

Training should include recognition of aggression, de-escalation techniques, physical intervention techniques and post incident recovery strategies. This training should be provided to the team involved in the delivery of service to a student. The Ministry of Labour will write orders against the employer where there are not policies and procedures with respect to special needs students. Ideally, the JHSC should play a role in determining the appropriate type and delivery of that training.

Pre-placement and Ongoing Student Evaluations

The need to identify possible risks is vital in protecting the worker. This may be accomplished through the Individual Program Review Committee (IPRC), Individual Education Plan (IEP), and Case Conference procedures. All workers must be appropriately trained prior to assignment where a risk has been identified. All workers supporting a student with special needs must be made aware of any student history of violent incidents to enable the team to develop safe work practices.

Staffing Levels

Evaluation of safe levels of staffing and defining what specific qualifications or formal instructions are needed to provide adequate supervision and support must be determined. Regular program reviews are necessary to ensure that the program continues to support a safe working environment. Workers should be given an opportunity to express their concerns regarding their work with a particular student without the fear of negative consequences.

Emergency Response Procedures

All potential disasters such as fires, tornadoes, intruders, bomb threats and blackouts must have procedures that are written and well communicated. Training and the regular opportunity for practice must be provided. See Controls section under Emergency Response for more details.

Employers must work with local authorities to develop, train and communicate appropriate procedures. This will mean that there may be a variance in procedures from District to District.

Backup Assistance and Communication Devices

It is always preferable that workers do not work alone. The reality is that sometimes this is unavoidable. If a worker is required to work alone, the employer must make provisions to ensure that back-up assistance can be obtained. This may take the form of communication devices such as walkie-talkies, pagers, alarms, or cell phones. Work situations should be examined to analyze the appropriateness of a device. In all cases, there must be someone available to monitor and respond to the situation.

For example: worker A is required to patrol the hallways of the building. Worker A should be provided with a communication device to facilitate receiving assistance if necessary.

Accident/Incident Reporting

Violence is an identified workplace hazard. As such, all accidents, incidences and near misses involving violence must be reported using the regular reporting procedure for your employer. In addition to the incident/injury form for physical injuries, the worker must also fill in a violence reporting form and perhaps a safe schools form if a student is involved. In all cases, all incidents must be reported promptly to the supervisor (manager, principal, etc.). Workers who are injured should seek medical attention immediately so as to protect their rights under WSIB.

Physical Design of the Workplace

Many times violent or aggressive special needs students act out or throw things. The physical design of the workplace may require redesign to enable the worker to work safely. This may mean securing equipment, retrofitting washrooms/change tables, purchasing lifting devices and other devices as deemed necessary. As a general rule of thumb, the workplace design should not place a worker in a dangerous circumstance. Specific measures must be taken to prevent injury from occurring. Examples of specific design and layout changes are doors with clear windows and ensuring adequate lighting.

Monitoring, evaluation and training must be ongoing. This program must encompass any activity outside of the normal routine such as field trips, co-operative education programs and sports activities off site.



CONTROLS

ACCIDENT/INCIDENT REPORT

All incidents must be reported promptly to the supervisor (manager, principal, etc.). Workers who are injured should seek medical attention immediately so as to protect their rights under WSIB.

EMERGENCY RESPONSE

Procedures/Lockdowns

The school shootings at Columbine High School in 1999 raised awareness that school systems did not have adequate emergency preparedness plans in place. Unfortunately these events continue and officials learn from each tragedy and recommended procedures are subject to improvements. Training and the regular opportunity for practice must be provided.

The Safe Schools Act introduced the Provincial Model for a Local Police/School Board Protocol in 2000 to ensure school boards coordinated emergency plans with police and other emergency organizations. Employers must work with local authorities to develop, train and communicate appropriate procedures. This will mean that there may be a variance in procedures from District to District.

Not only do schools need to be prepared for Lockdowns in response to violent incidents but all potential disasters such as fires, tornadoes, intruders, bomb threats, gas leaks, and blackouts must have procedures that are written and well communicated.

In 2013, the Ministry of Education developed Guidelines for Developing and Maintaining Lockdown Procedures for Elementary and Secondary Schools in Ontario Mandatory Requirements: All publicly funded school boards in Ontario must establish a lockdown policy to ensure the development and implementation of individual school plans. It would be prudent for each post-secondary institution to do the same.

Terminology is very important. Plans should clearly identify when "Lockdown" versus other terminology is to be utilized. Terminology used to order a lockdown, should be plain language, clear and leave no misunderstanding as to what is expected. No secret passwords should to be used.

"Lockdown" should only be used when there is a major incident or threat violence within the school or in relation to the school. The over or misuse of lockdowns, will result in staff/students becoming desensitized and they will not take lockdowns seriously.

"Hold and Secure" should be used when it is desirable to secure the school due to an ongoing situation outside and not related to the school (e.g. a bank robbery occurs near a school but not on school property). In this situation, the school continues to function normally, with the exterior doors being locked until such time as the situation near the school is resolved.

"Shelter in Place" should be used for an environmental or weather related situation, where it is necessary to keep all occupants within the school, to protect them from an external situation. Examples may include chemical spills, blackouts, explosions or extreme weather conditions.

Emergency response procedures must take into account all potential physical areas of the workplace, e.g. washrooms, libraries, snooze rooms etc. and provide procedures for evacuation and/or safe removal of students within an emergency preparedness framework. In developing lockdown plans, each school should consider the following:

- roles and responsibilities
- · floor plans
- · identification of buildings, exterior doors, classrooms
- initiating lockdown
- classroom/other secure area—procedures during lockdown
- portables
- · washrooms—procedures during lockdown
- open areas—procedures during lockdown
- · child care and other facility occupants
- outside of school buildings when a lockdown is called
- · controlled evacuation—with alternate evacuation sites
- · fire alarms
- · procedures to end a lockdown
- training
- · drills: minimum of two lockdown drills must occur each school year
- media
- · communication with parents/guardians/community
- · school recovery following a lockdown
- · plan review

Procedures during lockdown should consider:

It is recommended that, before locking a door, staff should gather everyone in the immediate vicinity into their classroom or other secure area, but only if it is safe to do so. Once inside a secure area, staff and students should:

- · stay away from doors and windows
- · turn off lights
- · close blinds
- · beware of sight lines
- if there is a window in the classroom door, consider covering window
- take cover if available (get behind something solid)
- · remain absolutely quiet
- · teachers to take attendance
- no cell phone use unless necessary to communicate regarding the incident (cell phones should be shut off or put on vibrate)

These procedures are subject to change based on experiences and the local authorities. Joint Health and Safety Committees should be involved in the debriefing after any event, should be consulted when any changes are made and should be able to make recommendations not only to the employer, but for the employer to share with the Local Police/School Board Protocol.

Emergency Preparedness

Employers have a duty to have specific plans that deal with procedures for emergencies such as tornadoes, fires, intruders, bomb threats, etc. Good plans include but are not limited to:

- how the workplace will be secured
- how workers will be notified of an impending emergency
- · outlining key roles for specific individuals
- · clear guidelines for the procedure
- who will contact emergency services

- · mechanisms for practice
- a system to account for all employees—no man down
- procedures for communication
- maps

Please check the OSSTF/FEESO website www.osstf.on.ca for more concise information.

ERGONOMICS

Repetitive strain injuries occur when workers repeat the same motion and work in the same position for long periods. These static body positions can cause muscle tension and reduce the blood flow to muscles. These injuries often occur when workstations or work environments are not properly suited to the worker. Common symptoms include pain, burning, aching, tingling, numbness, loss of grip and tenderness.

Members who suspect that their symptoms are work-related should see their physician immediately and report the symptoms to their Health and Safety Representative as well as their supervisor.

Using Ergonomics to Prevent Injuries

Ergonomics is the science of fitting the worker to the work. Often, outdated or unsuitable furniture contributes to workplace injuries. The increased use of computer technology has increased the number of work-related repetitive strain injuries such as carpal tunnel syndrome. The key to preventing these injuries is to work smart by:

- varying tasks to change body positions
- developing good work/rest schedules
- · using proper lifting techniques
- · properly positioning lights and desks
- using the proper technique for keyboarding (wrist relaxed, not bent or hyper-extended)
- · keeping the head aligned with the spine while sitting
- · not slouching
- not sitting for more than 50 minutes at a time
- not working at a desk/table that is too high
- sitting so that your body is properly positioned
- use and purchase adjustable furniture/equipment to address different user sizes and to maximize workstation flexibility
- chairs should come with adjustable arm rests that are cut away from the front edge of the edge of the seat
- keyboards should be placed on articulating keyboard arms
- lighting should not produce glare on screens, specific task lighting as an option is suggested as well
- not enough light can produce eye strain as well
- controlling the amount of exterior light also assist with the prevention of eye strain

For more detailed information on many of the above items go to The Ontario Ministry of Labour website and select the Musculoskeletal Disorders/Ergonomics resource sheet which may be found at www.labour.gov.on.ca/english/hs/pubs/index.php. Toolkit may be found at www.iwh.on.ca/msd-tool-kit.

If you believe that your workstation/work environment is not suitable contact your Health and Safety Representative and your supervisor.

EXPOSURE LIMITS

Many materials and biological substances are known to be toxic to workers. In order to reduce the risk of exposures to hazards chemicals and biological agents the Ontario Ministry of Labour sets exposure limits on hundreds of materials. New materials are added to the list as new evidence becomes available and adjustments to exposure levels can change due to new evidence.

The intent of the exposure limits is to allow certain products to be used in a fashion which will not cause long term or short term hazard to workers where the product is employed. If the exposure limit is not exceeded then no adverse effects should be developed in the worker. However, because of the variance in tolerance between different people, some workers may experience discomfort from some of the products even when below the established limits. Further some workers may experience aggravation of a pre-existing condition even below the exposure limits.

The exposure limits are guidelines set by industrial and worker experience and testing on animals. They are not fine lines between safe and unsafe exposure; not a re the limits necessarily a relative index of toxicity of any particular material.

There are a few different exposure limits and each limit reflects a certain set of potential conditions.

TWA (Time Weighted Average) The average airborne concentration of an agent to which a worker may be exposed over the course of a work day or work week.

STEL (Short Term Exposure Limit) The maximum concentration of an agent to which a worker may be exposed during any 15 minute period. This assumes the worker will not be exposed to a concentration greater than the TWA limit if the short term exposure is averaged over the entire work week.

CEV (Ceiling Exposure Value) The maximum airborne concentration or a biological or chemical agent to which a worker may be exposed at any time.

SKIN-This notation indicates that there is risk of exposure of the agent being absorbed through the skin, eyes, or mucous membranes. This notation would generally indicate that other preventative actions such as use of personnel protective equipment should be used to protect against absorption of the material through the above mentioned routes of entry.

Generally speaking the limits are to be achieved for the workers without workers being required to wear personal protective equipment, although wearing appropriate PPE may further reduce risk and may be helpful to those who are sensitive to exposure.

Different jurisdictions set their own exposure limits and determine which agents are on the list of regulated products. Accordingly, the exposure limit on the MSDS may not always be the same as the Exposure Limits for Ontario Workplaces (under Regulation 833). Some MSDSs may list exposure limit terminology generally used in the USA which may include PEL (Permissible Exposure Level) and TLV (Threshold Limit Value). Nevertheless the Exposure Limits for Ontario Workplaces under Regulation 833 apply in Ontario.

FIRE SAFETY PLAN

Fire safety plan—Ontario Fire Code Office of the Ontario Fire Marshall

The Ontario Fire Code, Section 2.8., requires the establishment and implementation of a fire safety plan for buildings containing a Group "A" occupancy. III

The intent of the fire safety plan is:

- provide simple, basic emergency procedures for the safe evacuation of building occupants
- effective utilization of building fire protection system during an emergency
- · provide instruction and guidance on other matters of fire safety
- ensure proper scheduled maintenance of fire protection system as required by the Code

Audit of building resources:

- fire department access—approved fire route
- sprinkler and standpipe connections
- · location of entrance to building by firefighters
- fire alarm systems (single zone or multi-zone)
- location of main control panel and annunciator panel
- · fixed extinguishing systems
- · emergency lighting and power
- · sprinkler systems
- · hose cabinet system
- water supply

Posted emergency procedures:

- labels to be located in visible areas near pull stations, building entrance, elevator areas and inside elevators
- · emergency procedures posted in occupied rooms

Fire safety and hazards:

- control of fuel fire hazards (flammables in an egress)
- accumulation of combustible materials that may constitute a fire hazard
- · combustible materials in hallways, stairwells or classroom ceilings
- · storage of flammable and combustible gases and liquids
- · compressed gas cylinders
- activities that produce combustible dust

Control of heat or sources of ignition:

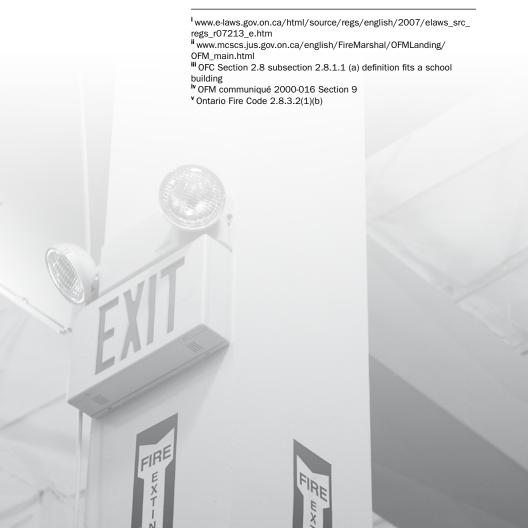
- storage of combustible materials near a kiln
- · extension cords being used as permanent wiring
- store oxidizing chemicals separate from organic solvents and combustible materials
- auto shop trouble lights must be 'fluorescent' type iv

Safe egress and exit routes:

- exits, stairways, landings and hallways clear of obstructions
- keep external exits frees of obstructions (snow, ice, vegetation, vehicles, bikes)
- doors in fire separations closed at all times
- · exit doors are not locked, bolted or chained
- clear access to fire protection equipment, sprinkler controls, sprinkler heads, and alarm pull stations
- ensure occupant load does not exceed the posted limit
- exit routes are clearly posted in all rooms
- exit lighting and emergency lighting is functioning

Fire drills: V

• shall be held 3 times in each of the fall and spring school terms



GLOBAL HARMONIZED SYSTEM (GHS)

Since 1988 WHMIS materials have fulfilled a vital need for Canadian workers to learn about the hazards of products being used in the workplace and to provide guidance in areas such as personal protective equipment, first aid, and other information about the chemicals being used. Many other countries developed similar systems to inform and protect the workers; however the standards of warning and the type and amount of information required varied considerably between countries.

Global trade has dramatically altered the types of chemical products entering our country. For many years the United Nations has worked on developing a Global Harmonized System of presenting Health and Safety Data relating to products. Labelling of the products under GHS is different from the current label format and the material safety data sheet (MSDS) which was the main method for passing on comprehensive hazard information about products will be changed to a Safety Data Sheet (SDS) under GHS implementation. Other changes will occur in the acts governing the transportation of dangerous goods and other legislation which controls the use of hazardous materials in Canada. The government is currently targeting June 2015 for implementation of GHS for pure chemicals (mixtures of chemicals such as formulated cleaners or paints which contain many chemicals the change to GHS will be implemented at a later date).

Some of key changes in the system will be the use of new hazard classifications and symbols. For example three main hazard classification are physical hazard (for example potential to explode and cause physical injury), toxicity (as an example poisonous characterisation such as "carcinogenic"), and environmental hazards (such as toxic to freshwater fish). The level of hazard and type of hazard will be placed clearly on top of the product label.

There will need to be a substantial amount of training provided to implement the new system and to enable workers to understand the new symbols and formats. A group has been formed by the federal Minister of Health to determine the level and requirements of training under the new guidelines without representation of workers groups such as trade unions.

Nevertheless an Administrative Policy has been developed whereby, subject to certain conditions, material safety data sheets that use a Globally Harmonized System of Classification and Labelling of Chemicals 16-heading format for WHMIS controlled products are accepted in Canada as meeting the format requirements of the Controlled Products Regulations (CPR). Some products now use the SDS as a response to the internet inquiry for MSDS.

INSPECTIONS

The physical workplace must be inspected on a monthly basis by a worker representative. The schedule for workplace inspections must be mutually agreed to by the workers and the employer. The workplace inspector has the power to enter all physical areas of the workplace for the purpose of the inspection. Employers must assist the inspection process by providing all information requested concerning Health & Safety in the building. The worker has the right to request hygiene test results that have occurred in the workplace. The main goal of the workplace inspection is to identify existing and potential hazards that could result in injury to the worker.

For a detailed sample of inspection priorities please refer to the OSSTF/FEESO Inspection Checklist which follows.

INSPECTION CHECKLIST

LOCATION:

DATE:

SCHOOL—H&S MATERIALS POSTED	YES	NO	N/A	COMMENTS
Occupational Health & Safety Act posted				
Board's Safety Policy posted				
Names of Joint Health & Safety Committee Members posted				
Names of School Safety Committee Members posted				
Workplace Safety and Insurance Board in Case of Injury at Work Poster posted				
Harassment & Violence Policy posted				
Minutes of JHSC & Site Committee meetings posted				
Hygienic testing results posted				
MOL orders posted				
Certificates of First Aid Trained Workers posted				
Emergency Exit Signs posted				
Emergency Procedures posted				
Protocols for Biological/Chemical cleanup posted				
Occupancy load posted where required				
LOG-BOOKS	YES	NO	N/A	COMMENTS
Fire System/GFI Log Book up to date				
Well/Water Management Log Book				
Asbestos Log Book				
Material Safety Data Sheets (MSDS) Book				
Board Safety manual				
Salt & Sanding Log Book up to date				
School Sign In Log Book				
Crisis/Lockdown Log Book				
Workplace Hazardous Materials Information System (WHMIS)—training log up to date				
Training logs present (use of equipment, PPE, etc)				
Safety Management/Behavioral Plans				
Accident Reports				
Lockout procedure Manual				
CHEMICAL HAZARDS (GENERAL USE)	YES	NO	N/A	COMMENTS
MSDS for locally purchased products				
Material Safety Data Sheets (MSDS) available in work area				
WHMIS Labels on products (locally decanted, commercial)				
Chemical spill kits present, labelled and training completed				

PHYSICAL HAZARDS (GENERAL AREAS)	YES	NO	N/A	COMMENTS
Availability & condition of hearing protection				
Availability & condition of eye protection				
Availability & condition of footwear protection				
PPE requirement signs posted				
No Slipping/tripping hazards present				
Furniture & equipment in good repair				
Shelving & racking above 48" secured (locally built)				
No material extending over shelf edge				
Projector screens, rollup maps secured				
No material & equipment stored 30 cm (18") away from emergency sensors and lights				
No material & equipment stored 60 cm (36") from lowest structural member				
No material & equipment obstructing fire suppression system				
Hallways clear of blockage or obstructions				
Built in ladders secure				
Built-in ladder enclosures present and in good repair (where req'd)				
ELECTRICAL HAZARDS	YES	NO	N/A	COMMENTS
Electrical outlets secure, with no visible signs of damage				
Proper installation of appliances & equipment				
Ground pins present on three wire plugs, IMMEDIATELY REMOVE FROM SERVICE IF GROUND PIN MISSING				
No Electrical, power bars, extension cables frayed or broken				
Proper use of extension cords/power bars (no daisy chaining, extension cord to power bar)				
Electrical panels have one (1) metre clearance				
GFI outlets present where water supply within 6 feet				
Aquariums not in proximity of electrical wiring				
BIOLOGICAL HAZARDS (GENERAL)	YES	NO	N/A	COMMENTS
Procedures for cleaning animal cages & tanks posted				
Seal on refrigerator & freezer doors checked (mould free)				
Refrigerator condensation drain pan checked				
Heating system checked for leaking water or steam (mould potential)				
Plants, animal cages, or books not near airflow sources				
Air filters/vent hoods clean/free of grease				
Biological waste storage containers present and labeled				
Sharps disposal containers present and labelled				
FOOD PREPARATION/KITCHEN AREAS	YES	NO	N/A	COMMENTS
Recent Health Inspection report present				
Food preparation areas clean of contaminants				
Fire suppression system inspection records (commercial kitchens)				
Thermometers installed, in working order and correct temperatures maintained in refrigeration systems				
Chemicals labelled & stored properly (WHMIS)				
Chemicals are not stored with food products				
Knife storage protocols present				

Rammables stored in containers with spring loaded cap & flame arrester Separate storage for flammables & acids and labelled Separate storage for organics and labelled Separate storage for organics and labelled Verthed storage cabinets vented with fire rated ducting and spark arrestors on fams Compressed gas cylinders present, fastened securely & valves closed when not in use Compressed gases stored correctly (caps secure?) Refrigerators used exclusively for chemical/biological storage Chemicals stored according to similarities in chemical properties Incompatible chemicals separated & stored apart Chemicals labelled properly (WHMIS) Decarated or Mixed chemicals stored & labelled properly (WHMIS) Fume hoods & exhaust ventilation used appropriately for used for storage) Fume hoods clean, clear of obstructions & functional Spill control kit awailable Readily accessible & visibly labeled master shutoffs for water, gas, electricity Valves operating properly & free of visible corrosion Clearly marked containers present Teacher's desk located outside chemical storage/ preparation area No food or drink for consumption in chemical storage/ preparation area No food or drink for consumption in chemical storage/ preparation area No food or drink for consumption in chemical storage/ preparation area TECHNICAL AREA—SPECIFIC YES NO N/A COMMENTS Hammables stored in containers with spring loaded cap & fame arrester Separate storage for flammables & acids Decarated or Mixed chemicals stored & labelled properly (WHMIS) Chemicals labelled properly Clearly marked & proper containers for broken glass, flammable & cother potentially hazardous waste Readily accessible master shutoffs for water, gas & electricity Welding booths, paint spray booths using exhaust ventilation Flain booth equipment negatively grounded and properly vented Waste chemical containers present and labelled	SCIENCE AREA—SPECIFIC	YES	NO	N/A	COMMENTS
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Waste chemical containers present and labelled	Paint booth equipment negatively grounded and properly vented				
	Spill kit accessible				
	Waste chemical containers present and labelled				
High voltage sources clearly labelled	High voltage sources clearly labelled				

Eye wash station present, operating and clear of obstructions				
CSA approved personal protective equipment present (eye protection, gloves, apron, etc.)				
Machine guarding present where required				
Machine guards meet standards				
Machine lockout procedures/equipment present and training				
Machine emergency shutoff controls must be easily accessible				
Tools repaired, clean, sharp & properly stored when not in use				
Power tools & other equipment guarded to prevent access to cutting zone or pinch points				
Lifting devices (hoists, A-frames, engine lifts) & stands labelled with their capacity & inspection tag				
Equipment secured to floor				
Operator space marked				
Training on specific equipment to meet the "competent person" requirement				
Welding Arc Flash Shields/Screen present and in use				
Floors clean and clear of oil spillage or leakage				
Light levels appropriate for the task				
Dust control systems cleaned regularly				
PHYSICAL EDUCATION AREA SPECIFIC	YES	NO	N/A	COMMENTS
Exhaust, air exchange ventilation systems clean and free of obstructions				
Equipment storage rooms in order (floor clear, vertical standards stored securely, etc.)				
Equipment inspections current and tagged				
Light covers secured				
Wall dividers, curtains fire rated, testing logs available				
Wall dividers/curtains operation procedures available and training				
Retractable seating functional & inspection logs present				
Gym Floors clean, free from obstructions or slip hazards				
Weight Training equipment inspection tags				
Weight training rooms ventilation system adequate for use				
Appropriate hygienic cleaning supplies available				
Athletic Floor sockets secure				
ERGONOMIC HAZARDS	YES	NO	N/A	COMMENTS
Step ladder or step stool available (Grade 1 or 2 only)				
Roof access hatch counter weighted				
Tasks varied to reduce repetitive motion activities				
Work stations task orientated				
Light levels appropriate for the task				
Mechanical equipment available to assist with material movement				
Equipment checked for excessive vibration				
Ergonomic Chairs with 5 legs present				
Access to Ergonomists				
Anti-fatigue mats available where required				

Flammables stored in containers with spring loaded cap & flame arrester Condition of ladders checked Condition of ladders checked Condition of ladders checked Wheels on equipment checked Condition of snow blowers checked Wheels on equipment checked Condition of snow blowers checked Condition of lawn tractors/trimmers checked Storage of supplies checked Eye wash station present, operating and clear of obstructions Charging of electrical batteries performed in designated areas EXTERIOR HAZARDS YES NO N/A COMMENTS Exterior brick/siding intact Sidewalks, driveways, steps intact Exterior sports equipment securely mounted Appropriate signage installed (cross-walks between parking lots etc.) Walking surfaces clear of obstructions Tie-off points present for roof access/activities Exterior built-in ladders secure Exterior built-in ladders secure Exterior built-in ladders secure Exterior built-in ladders secure Exterior built-in ladders present and in good repair DESIGNATED SUBSTANCES: ASBESTOS, LEAD, MERCURY & SILICA—IF ANY CHECK BELOW Applicable Administrative Procedure & proper work procedures being followed Condition and/or use of designated substance checked OTHER YES NO N/A COMMENTS Means of egress clear of obstructions Door openings and the surrounding area clear of obstructions that could interfere with the free operation of the door. Fire exts clearly marked Confined spaces clearly marked Confined spaces clearly marked Eating facilities meet minimal hygienic standards Capacities of elevating devices (elevators) posted First Ald Teathment Record & Inspection Schedule up to date First Ald Teathment Record & Inspection Schedule up to date First Ald Teathment Record & Inspection Schedule up to date First Ald Teathment Record & Inspection Schedule up to date First Ald Teathment Record & Inspection Schedule up to date First Ald Teathment Record & Inspection Schedule up to date First Ald Teathment Record & Inspection Schedule up to date	CUSTODIAN/MAINTENANCE EQUIPMENT	YES	NO	N/A	COMMENTS
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(within 10 seconds unobstructed travel)	First Aid Kit readily available as per WSIB regulation 1101				
Curtains—fire rated, tested, logs					
	Curtains—fire rated, tested, logs				

January 2013

LOCKOUT/TAGOUT PROCEDURES

There are many types of potentially hazardous energy including, electrical, thermal, chemical, pneumatic, hydraulic, mechanical and gravitational energy. All such forms of energy must be locked out, blocked or released to ensure that machinery or equipment does not turn on or move during installation, repair or maintenance. It is important that workers have been trained by their employers in lockout/tagout procedures before attempting this procedure. If this procedure is required, and adequate training has not been provided to the worker, you should immediately contact your supervisory officer for assistance.

ENERGY ISOLATING DEVICE

A disconnect switch, circuit breaker, manually operated valve, blind flange, or other device used to ensure that power or energy cannot flow to a piece of machinery or equipment.

GENERAL RESPONSIBILITIES

- The employer shall provide information, instruction and supervision to workers on proper lockout procedures for each piece of equipment they will be operating.
- An initial review should be made to determine which switches, valves, or other energy isolating devices apply to the equipment being locked out. More than one energy source (electrical, mechanical, hydraulic, pneumatic, chemical, thermal, gravitational) may be involved.
- The employer should ensure that workers know which energy sources may need to be controlled. Workers should check with a supervisor or other knowledgeable person if in doubt about which energy sources may need to be controlled.
- When equipment is to be locked out, employers, supervisors and workers should follow accepted lockout principles, including:
 - Pre-planning for the lockout by identifying all energy sources, switches, etc.
 - Where lockout is complex, a written sequence in checklist form should be prepared for equipment access, lockout/tagout, clearance, release and start-up.
 - · All workers affected by the lockout should be notified.
 - Equipment should be shut down by normal means by turning of switches and closing valves etc.
 - Equipment should be isolated from energy sources by disconnecting or blocking the sources of energy.
 - Lockout and tag the energy isolating devices by padlock or some other locking device that the worker has control over as well as a tag indicating that the equipment has been shut down.
 - Verify that all energy sources have been isolated by attempting to cycle the equipment prior to working on it.
 - When work is completed, release equipment from lockout.
 - · Test equipment.

MACHINE GUARDING

Machine Guarding is a means of protecting the operator from parts or materials that are, may become potentially dangerous or may cause injury during operation of the machine. Many OSSTF/FEESO members work with equipment that must be guarded. It is essential and necessary that machine guarding is used to keep operators safe from injury during operation of the machine. Lathes, table saws, planers, band saws, paper cutters, drill and metal presses are examples of machines that all require safeguards to protect both the worker and the students that may be working with the same equipment. OSSTF/FEESO members are prohibited from altering or disabling these guards (OHSA s. 28. (2)) and may suffer discipline from the employer if they do so.

Regulation 851 Section 24—Where a machine or prime mover or transmission equipment has an exposed moving part that may endanger the safety of any worker, the machine, prime mover or transmission equipment shall be equipped with and guarded by a guard or other device that prevents access to the moving part.

Regulation 851 Section 25—An in-running nip hazard or any part of a machine, device or thing that may endanger the safety of any worker shall be equipped with and guarded by a guard or other device that prevents access to the pinch point.

Regulation 851 Section 26—A machine shall be shielded or guarded so that the product, material being processed or waste stock will not endanger the safety of any worker.

Appropriate training should be provided prior to initial operation of the machine to all operators to ensure the knowledge of how and under what circumstances guards can be removed, how to identify guards that are damaged, altered, missing or inadequate for the machine. Outdated, incomplete or missing hazard assessment, inadequate training, shortcuts or poor maintenance, missing safeguards (guards, emergency stops) often contribute to injuries while using machines.

During the Ontario Ministry of Labour workplace inspection initiative between September 2011 and June 2012, 283 stop work orders were written (stop work orders—violations that are found to pose an immediate danger to a worker); of these orders, 64 per cent were for machine guarding or shielding; missing, damage or inadequate. In some cases orders have been written for machines that did not have manufacturer provided guards, these machines are typically older and may require a certified engineer to engineer a guard to be manufactured and installed prior to resumption of use. Guarding should include locking access to internal mechanisms, i.e. belts, blades or gears, while the unit is in operation, as well they must be installed so as to not interfere with safe operation of the machine.

It is incumbent upon OSSTF/FEESO members to ensure that guards are not disabled or removed and that any malfunction or problem with respect to these guards is reported to the supervisor in a timely manner. Machines with guards that are missing or damaged should be locked out of service until guards are re-installed, replaced or repaired and the machine is safe to operate. Any repairs to these machines must be done by or under the supervision of the appropriate school board personnel as per the required manufacturer's specifications for that machine.

Remember there is never a good reason to remove a guard; guards are there to protect you from injury!

PERSONAL PROTECTIVE EQUIPMENT (PPE)

The Ontario Health and Safety Act (OHSA) requires employers to take all reasonable precautions to protect employees from workplace hazards. Many of the precautions require that personal protective equipment is worn for many tasks done by OSSTF/FEESO members in the course of their employment.

Personal protective equipment includes safety glasses, face shields, safety boots, or defined footwear, arm guards, hearing protection from ear plugs or over the ear muffs, and dust masks or even cartridge type respirators, and other devices which may be necessary for particular hazards. Close-toed shoes may be required in science labs were broken glass may have been inadvertently left on the floor after breakage. When using the PPE it is essential that the devices is designed for the application thin disposable gloves do not provide adequate protection from certain chemicals, safety glasses do not provide adequate protection for exothermic chemical reactions where face shields are recommended.

OHSA requires that employers provide and maintain necessary PPE. The law also requires that employees must use the recommended PPE as prescribed by the employer. Further the worker is required to report any damaged or defective PPE to the employer for replacement or repair.

Personal protective devices must fit properly to be effective. Never attempt to modify the equipment beyond the manufacturer's suggestion as small modification can substantially alter the effectiveness of the device. Equipment should always be checked before and after use to ensure the device is well maintained and has suffered no damage during use.



WORKPLACE SAFETY AND INSURANCE BOARD (WSIB)

2012 STATISTICAL REPORT SCHEDULES

WORKER AND CLAIM PROFILE SCHEDULE 1

• gender: male (62 per cent)

age group: 25 to 44

• nature of injury: sprains and strains

event: overexertionpart of body: low back

· occupation: motor vehicle and transit drivers

WORKER AND CLAIM PROFILE SCHEDULE 2

• gender: male (51 per cent)

age group: 25 to 44

• nature of injury: sprains and strains

event: overexertionpart of body: low back

ALLOWED CLAIMS AND INJURY RATES

INJURY/ILLNESS YEAR						
SCHEDULE 1	2008	2009	2010	2011	2012	
ALLOWED LOST TIME CLAIMS	61,992	50,104	46,160	43,371	42,702	
ALLOWED NO LOST TIME CLAIMS	144,489	115,340	108,660	108,954	109,648	
WSIB COVERED EMPLOYMENT	4,108,618	3,932,241	4,009,201	4,128,939	4,239,440	
LOST TIME INJURY RATE	1.51	1.27	1.15	1.05	1.01	
NO LOST TIME INJURY RATE	3.52	2.93	2.71	2.64	2.59	

INJURY/ILLNESS YEAR						
SCHEDULE 2	2008	2009	2010	2011	2012	
ALLOWED LOST TIME CLAIMS	16,268	14,739	14,040	13,301	12,823	
ALLOWED NO LOST TIME CLAIMS	17,182	16,503	15,192	14,721	14,371	
WSIB COVERED EMPLOYMENT	636,083	700,205	702,383	695,358	694,335	
LOST TIME INJURY RATE	2.56	2.10	2.00	1.91	1.85	
NO LOST TIME INJURY RATE	2.70	2.36	2.16	2.12	2.07	

2012 LEADING OCCUPATION CHARACTERISTICS

SCHEDULE 2	LEADING AGE GROUP	LEADING GENDER	LEADING EVENT	LEADING SOURCE	LEADING PART OF BODY	LEADING NATURE OF INJURY
Secondary and Elementary School Teachers & Counsellors	50–54	Female	Fall on same level	Structures (including walkways, floors and buildings	Multiple body parts	Sprains and strains

2012 LEADING INJURY EVENT CHARACTERISTICS

SCHEDULE 2	LEADING AGE GROUP	LEADING GENDER	LEADING OCCUPATION	LEADING NATURE OF INJURY	LEADING SOURCE	LEADING PART OF BODY
Fall on same level	50–54	Female	Secondary and elementary school teachers & counsellors	Sprains and strains	Structures (including walkways, floors and buildings)	Multiple Body Parts
Struck by objects or equipment	50–54	Female	Secondary and elementary school teachers & counsellors	Bruises, contusions	Persons (bodily motion or condition)	Cranial region, including skull

WSIB CLAIMS

WHAT IS WSIB?

The Workplace Safety and Insurance Board (WSIB) is an employer-funded system of compensation benefits available to workers who are injured on the job or become ill because of the job. Under the system employees do not have the right to sue employers but can be compensated by the WSIB if they sustain "a personal injury by accident arising out of and in the course of employment."

What to do if you have sustained a work-related injury or illness?

- Immediately report the injury/illness to the supervisor or principal, in writing where possible, indicating date, time, nature of accident, body parts affected and witnesses. (Employee incident or accident report)
- Seek medical attention right away. If your family doctor is not available, go to the emergency department. You must inform the physician that it is a work-related injury/illness. The doctor will fill in a Form 8 (Health Professional Form) and forward it to the WSIB.
- 3. You should request that your employer complete a Form 7 (Employer's Report of Injury/Disease) and that you receive a copy.

- 4. You may be requested to complete a Form 6 (Worker's Report of Injury/ Disease) or a Worker's Progress Report. Complete these forms in detail and return them to the WSIB immediately.
- Contact your Bargaining Unit immediately so that they may assist you. Provide them with copies of any documentation that has been forwarded to the WSIB.
- **6.** Speak with your Bargaining Unit as a Long Term Disability application may be necessary.

PAYMENT

The WSIB pays 85 per cent of your net average earnings while you are off. Memorandum of Understanding "top-up" provisions applies to ensure that 100 per cent of salary is covered with no deduction to sick leave if there existed a previous contractual agreement between the Union and the School Board. WSIB Maximum Insurable Earnings (2014) \$84,100.

EARLY AND SAFE RETURN TO WORK

Any time the WSIB feels that an employee's medical condition has changed from totally disabled to partially disabled, the WSIB will expect that the employee will return to work that is modified to reflect the medical restrictions. You must co-operate in the return to work process or the WSIB may discontinue benefits.

WHAT IS A FUNCTIONAL ABILITIES FORM?

This is a WSIB form that is used to try to determine what an employee is physically capable of doing and what limitations/restrictions are required to return to work. The Functional Abilities Form (FAF) should not provide the employer with a diagnosis but rather a list of limitations or restrictions that would assist an employer in modifying work.

If an employee's physician believes that he or she is temporarily totally disabled, the physician should not list any restrictions on the FAF and should clearly indicate on the form that the employee is not ready to do any type of work at all.

DUTIES OF AN EMPLOYEE

Employees are required to co-operate at all times with the WSIB and the employer during the early and safe return to work by:

- Reporting the injury/illness to the employer as soon as possible after the injury and continue to communicate with the employer throughout the recovery period.
- Assisting the employer to identify appropriate employment.
- Providing information as requested by the WSIB.
- Notifying the WSIB of any change to the worker's health status, income or job.

DUTIES OF EMPLOYERS IN THE RETURN TO WORK PROCESS

The employer is required to:

- Contact the employee as soon as possible after the injury and maintain regular communication throughout the recovery period.
- Identify and arrange appropriate employment.
- Provide information as requested by the WSIB.
- Notify the WSIB of any change in the employee's income or job.

DUTIES OF THE WSIB IN THE RETURN TO WORK PROCESS

Generally, the WSIB regards the return to work process as an agreement between the employer and the employee, and takes a very minimal role. However, the WSIB may:

- · Suggest available resources.
- Monitor the activities and progress of the employee or employer.
- Determine whether the parties are meeting their obligations.
- Mediate and decide on any disputes that may arise between the parties.

THE ROLE OF OSSTF/FEESO IN THE RETURN TO WORK PROCESS

OSSTF/FEESO believes that there should be a joint committee comprising the injured worker, union representation and employer representation that will work together to ensure an appropriate return to work program. Collective agreements should contain language pertaining to this. Bargaining Unit representatives should contact the Provincial Office for more details.

APPEALS

Assistance with the WSIB appeals can be obtained through the OSSTF/FEESO Provincial Office Protective Services Department. The following is a schematic of the appeals process.



Decision within the WSIB	Claim is denied in writing 6 months to appeal or 30 days for work reintegration Appeals Resolution Officer (ARO) Decision in writing
	6 months to appeals ARO decision
Decision independent of the WSIB	Workplace Safety and Insurance Appeals Tribunal (WSIAT) final and published decision

INVESTIGATIONS

Unlike the type of "surveillance" under Long Term Disability Insurance, when WSIB undertakes investigations it is truly a fact finding venture. Co-workers or witnesses may be interviewed so that the decision maker is provided with sufficient information in order to make an informed decision with respect to the claim.

TRAVELLING

WSIB POLICY WITH REGARDS TO DRIVING WHILE IN THE COURSE OF EMPLOYMENT

OPM 15–03–05 states that a worker is generally considered to be in the course of the employment when the person reaches the employer's premises or place of work, and is not in the course of employment when the person leaves the premises or place of work.

OPM 15–03–08 defines Personal Activities/Removing Self From Employment as doing something outside the worker's normal duties, such as transacting personal business, or going places having nothing to do with the worker's employment or doing something not reasonably expected of the worker.

TRAVEL ON EMPLOYER'S BUSINESS

When the conditions of the employment require the worker to travel away from the employer's premises, the worker is considered to be in the course of the employment continuously except when a distinct departure on a personal errand is shown. The mode of travel may be by public transportation or by employer or worker vehicle if the employment requires the use of such a vehicle. However, the employment must obligate the worker to be travelling at the place and time the accident occurred.

PROCEEDING TO AND FROM WORK

The worker is considered to be "in the course of employment" when the conditions of the employment require a worker to drive a vehicle to and from work for the purpose of that employment, except when a distinct departure on a personal errand takes place enroute. "In the course of employment" also extends to the worker while going to and from work in a conveyance under the control and supervision of the employer.

Refer to OPM 15–03–03: Without limitation to the following, the WSIB will consider entitlement in claims where a worker is injured when:

- Going to or from work in transport under the control and supervision of, or chartered by, the employer.
- Participating in a work-related sports activity, for example, school teachers and camp counselors, when the employer condones these activities by making the premises available and/or exercising a form of supervision and control.
- · Attending compulsory evening courses.
- Travelling on company business, by the most direct and uninterrupted route, under the supervision and control of the employer–travelling to or from a convention and/or participating in convention activities.
- On a lunch, break, or other non-work period (period of leisure) by ordinary hazards of the employer's premises.

OVERNIGHT ACCOMMODATION

Entitlement under the *Workplace Safety and Insurance Act* or the *Workers' Compensation Act* (the Act) extends to persons travelling in the course of employment to and from various places. Coverage also extends to accidents occurring in such places as hotels when the employer is paying the worker's expenses. The worker is covered should he suffer injury by accident at any time while in the hotel engaged in reasonable acts such as dining in the restaurant and using washroom facilities. If the worker chooses to dine in a restaurant other than in the hotel but within a reasonable distance of it, coverage is extended during this activity. There is no entitlement if the worker is injured while visiting a movie theatre or cocktail lounge or engaging in some other personal activity.

Should an injury result while driving or under any of the circumstances describe above the member should immediately contact their OSSTF/FEESO District Office or Provincial Office.

OCCUPATIONAL ILLNESS

OHSA Act & Regulations 2013

Is a condition that results from exposure in a workplace to a physical, chemical or biological agent to the extent that the normal physiological mechanisms are affected and the health of the worker is impaired thereby and includes an occupational disease for which a worker is entitled to benefits under the *Workplace Safety and Insurance Act*, 1997; s. 1(1)

S.25. Duties of Employers

An employer shall take every precaution reasonable in the circumstances for the protection of the worker

S.52.(2) Notice of occupational illness

"If an employer is advised by or on behalf of a worker that the worker has an occupational illness or a claim in respect to the illness has been filed with the Workplace Safety Insurance Board by or on behalf of the worker, the employer shall give notice in writing, within four days of being advised, to a Director, to the committee or a health and safety representative and to the trade union, if any, containing such information and particulars as are prescribed."

(3) Idem

If you suspect that your medical diagnosis is in any way related to the work you are currently doing or have done in the past including other jobs or occupations, inform your health care provider and contact your provincial field secretary to receive additional assistance from Provincial Office.

OSSTF/FEESO has an excellent track record in working with other trade unions to facilitate the gathering of information for WSIB claims for exposures in prior occupations.



www.whsc.on.ca

Occupational Cancers: A preventable epidemic Occupational Asthma: clearing the air

Solvents: a threat to workers and their children



www.ohcow.on.ca

Workplace Reproductive Hazards Silica

Potential Spread of Communicable Diseases through the Ventilation System Occupational Dermatitis

WSIB FACT REPORTING FORM

Worker's name:	WSIB claim #	:
WSIB case manager name & number:		
Lost Time/Health Care (circle appropriate)	Accident date:	
Time of accident:	Location of accident:	
To whom accident reported:		
Accident reporting date:		
Date & location of first medical attention:		
Attending physician:	WSIB fo	orm 8 filed: 🗖 Yes 🗖 No
Description of accident/incident:		
Worker's address:street name and number	r city	postal code
Telephone # home:	Work:	
Name of your union representative:		
District name and number:	Barga	aining Unit:
Workplace location:		day month year
Family doctor:		
Address:street name and number	city	postal code
Specialist:		
Address:street name and number	city	postal code
Witnesses:		
Witness address:street name and number	city	postal code
Return to work approved by physician? \square Ye	s No Date of return	to work:
Restrictions? Please list:		



RESOURCES

ACRONYMS

ACM	Asbestos Containing Material
ARO	Appeals Resolution Officer
BBS	Behaviour Based Safety
CEV	Ceiling Exposure Value
CPR	Controlled Products Regulation
dB	Decibels
dBA	Decibels Averages
DNA	Deoxyribonucleic Acid
FAF	Functional Abilities Form
GHS	Global Harmonized System
HEPA	High-Efficiency Particulate Absorption
HVAC	Heating, Ventilation, and Air Conditioning
Hz	Hertz
HIV	Human Immunodeficiency Virus
IRS	Internal Responsibility System
JHSC	Joint Health and Safety Committee
MCS	Multiple Chemical Sensitivities
MOL	Ministry of Labour
MSD	Musculoskeletal Disorder
MSDS	Material Safety Data Sheets
NEL	Non Economic Loss
NIHL	Noise Induced Hearing Loss
OEL	Occupational Exposure Limit
OHCOW	Occupational Health Clinics for Ontario Workers
OHSA	Occupational Health and Safety Act
ONIHL	Occupational Noise Induced Hearing Loss
OPM	Operational Policy Manual
PCM	Phase Contrast Microscopy
PEL	Permissible Exposure Limit
PPE	Personal Protective Equipment
SDS	Safety Data Sheet
SNHL	Sensorineural Hearing Loss
STEL	Short Term Exposure Limit
TEM	Transmission Electron Microscope
TLV	Threshold Limit Value
TWA	Time Weighted Average
VOC	Volatile Organic Compounds
WHMIS	Workplace Hazardous Materials Information Sheets
WHSC	Workers Health and Safety Centre
WSIAT	Workplace Safety and Insurance Appeals Tribunal
WSIB	Workplace and Safety Insurance Board

ORGANIZATIONS/CONTACT INFO

MINISTRY OF LABOUR (MOL)

400 University Avenue Toronto, ON M7A 1T7

416.326.7600

Toll-free: 1.877.202.0008 TTY: 1.855.653.9260 Fax: 905.577.1316

OCCUPATIONAL DISABILITY RESPONSE TEAM (ODRT)

15 Gervais Dr., Suite 202 Toronto, ON M3C 1Y8

416.441.2731

Toll-free: 1.800.668.9138 Fax: 416.441.0722

OCCUPATIONAL HEALTH CLINICS FOR ONTARIO WORKERS (OHCOW)

970 Lawrence Avenue West, Suite 110

Toronto, ON M6A 3B6

416.449.0009

Fax: 416.449.7772 toronto@ohcow.on.ca

All clinics can be reached at 1.877.817.0336

ONTARIO SECONDARY SCHOOL TEACHERS' FEDERATION (OSSTF/FEESO)

60 Mobile Drive

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www.osstf.on.ca/en-CA/services/health-safety

WORKERS HEALTH AND SAFETY CENTRE (WHSC)

15 Gervais Dr., Suite 802 Toronto, ON M3C 1Y8

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