

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

The *Workers Compensation Act* requires that the employer must post a copy of this report in a conspicuous place at or near the workplace inspected for at least seven days, or until compliance has been achieved, whichever is the longer period. A copy of this report must also be given to the joint committee or worker health and safety representative, as applicable.

Inspection Report #201913063010A

Employer Name	Jobsite Inspected	Scope of Inspection
THE UNIVERSITY OF BRITISH COLUMBIA	University Plant Operations 2329 West Mall Vancouver BC	Hand-arm vibration

Date of Initiating Inspection	Date of This Inspection	Delivery Date of This Report	Delivery Method
Jul 22, 2019	Jul 22, 2019	Aug 08, 2019	Email

THERE ARE ZERO (0) ORDERS OR OTHER ITEMS OUTSTANDING

<p>ACTION MAY STILL BE NECESSARY TO ENSURE COMPLIANCE PLEASE READ FULL REPORT</p>
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INSPECTION NOTES

On July 22 2019, this officer, Worksafe Ergonomist Gina Vahlas and Technical Specialist Kia Lidster met with the Occupational Health & Safety Manager to measure hand-arm vibration while a worker demonstrated a variety of landscaping equipment, including a chain saw, leaf blower, edger and trimmer. Measurements for a power-washer, concrete cutter and tamping machine were also taken.

Measurements were collected under various operating conditions.

A report detailing the vibration results of the trials will follow.

If anyone has questions regarding this report or requires further information they can contact this officer:

Isabel Reinelt, B.Sc.
Occupational Hygiene Officer
Vancouver/Richmond/Delta Region
WorkSafeBC
The Workers' Compensation Board of British Columbia
Ph: 604-231-8605
Fax: 604-231-8662
Toll-free 1-888-621-7233
E-mail: isabel.reinelt@worksafebc.com

More information on health & safety can be found at our website: www.worksafebc.com

REFERENCES

In addition to any orders, or other items, and the information provided in the Inspection Notes section in this Inspection Report, the officer may discuss other health and safety issues with the employer arising out of the inspection. The information below sets out the health and safety requirements discussed with the employer, and unless otherwise noted, violations of these requirements were not observed.

Reference	Details Discussed
<p>OHS7.10</p> <hr/> <p>In this Division:</p> <p>"hand-arm vibration" means vibration that is transmitted from vibrating surfaces of objects, such as hand tools, through the hands and arms;</p> <p>"vibration exposure limits" means the limits referred to in section 7.11;</p> <p>"whole-body vibration" means vibration that is transmitted to a worker's body from vibrating surfaces on which a worker stands or sits.</p>	<p>See inspection text.</p>
<p>OHS7.11(a)</p> <hr/> <p>An employer must ensure, to the extent practicable, that workers are not exposed to vibration in excess of the limits specified for hand-arm vibration, the American Conference of Governmental Industrial Hygienists publication entitled Threshold Limit Values and Biological Exposure Indices, dated 2003, as amended from time to time; except as otherwise determined by the Board.</p>	<p>See inspection text.</p>

Employer #	Mailing Address	Classification Unit #	Operating Location
11284	C/O WCB CLAIMS ADMINISTRATOR HUMAN RESOURCES 6TH FLOOR 6190 AGRONOMY RD VANCOUVER BC V6T 1Z3	765010	001

Lab Samples Taken	Direct Readings	Results Presented	Sampling Inspection(s)
N	N	N	

Workers onsite during Inspection	Notice of Project Number
500	

Inspection Report Delivered To	Employer Representative Present During Inspection	Worker Representative Present During Inspection	Labour Organization & Local
Tariq Din	Tariq Din	Lindsay Forsyth	CUPE 116, 2278, 2950, BCGEU

WorkSafeBC Officer Conducting Inspection
Isabel Reinelt

*Inspection Time	*Travel Time
3.00 hrs	0.50 hrs

*The time recorded above reflects the inspection time and travel time associated with this inspection report and includes time spent on pre and post-inspection activities. Additional time may be added for subsequent activity.

Right to Review

Any employer, worker, owner, supplier, union, or a member of a deceased worker's family directly affected may, within 45 calendar days of the delivery date of this report, in writing, request the Review Division of WorkSafeBC to conduct a review of an order, or the non-issuance of an order, by contacting the Review Division. Employers requiring assistance may contact the Employers' Advisers at 1-800-925-2233.

WorkSafeBC values your feedback. To obtain that feedback, an external market research provider may be contacting you to complete a survey.