# **INSPECTION REPORT**Worker and Employer Services Division



6951 Westminster Highway, Richmond, BC Mailing Address: PO Box 5350 Stn Terminal, 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.

A revised version of the *Workers Compensation Act* took effect on April 6, 2020. The B.C. government's revisions aim to make the Act easier to read and understand, and to reorganize the numbering to make laws easier to find. The revisions make no changes to B.C.'s laws concerning workers' compensation, occupational health and safety, and employers' assessment premiums. Please be aware there may be a transitional period where correspondence from WorkSafeBC may include references to either the previous Act or the revised Act. For more information, visit www.worksafebc.com/WCA2019 or call the Prevention Information Line at 604.276.3100, or toll free within BC at 1.888.621.7233 (SAFE).

Inspection Report #202117748115A		
Employer Name	Jobsite Inspected	Scope of Inspection
THE UNIVERSITY OF BRITISH COLUMBIA	Safety & Risk Services 2389 Health Sciences Mall Greater Vancouver A BC V6T	Communicable Disease Prevention

Date of Initiating Inspection	Date of This Inspection	Delivery Date of This Report	Delivery Method	
Dec 08, 2021	Dec 08, 2021	Dec 09, 2021	Email	

# THERE ARE ZERO (0) ORDERS OR OTHER ITEMS OUTSTANDING

ACTION MAY STILL BE NECESSARY TO ENSURE COMPLIANCE PLEASE READ FULL REPORT



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# **INSPECTION NOTES**

This inspection report pertains to matters of compliance with the Occupational Health and Safety Regulation (the Regulation) and the *Workers Compensation Act* (the Act). The inspection report is to provide the employer with information on communicable disease prevention.

## A) COMMUNICABLE DISEASE PREVENTION

This information is provided as a reference for the employer:

What is a communicable disease?

A communicable disease is an illness caused by an infectious agent that can be transmitted from person to person. Examples of communicable diseases that may circulate in a workplace include COVID-19, norovirus, and seasonal influenza.

What is communicable disease prevention?

Communicable disease prevention focuses on reducing the risk of workplace transmission of COVID-19 and other communicable diseases. The fundamental components of communicable disease prevention include ongoing measures, practices and policies to maintain at all times.

What are employers expected to do?

Employers must take all reasonable steps to manage health and safety in their workplace, including preventing communicable disease transmission.

As part of the process for understanding risk and implementing measures, practices, and policies, employers should be aware of and follow orders, guidance or recommendations from their regional health authority or the Provincial Health Officer that are applicable to their workplace, including any additional area or industry specific recommendations.

#### Resources:

Information on communicable disease prevention is available on WorkSafeBC's website.

Communicable disease prevention: https://www.worksafebc.com/en/covid-19/bcs-four-step-restart

Employers, other than those in healthcare settings may also refer to Communicable disease prevention: A guide for employers: https://www.worksafebc.com/en/resources/health-safety/books-guides/communicable-disease-prevention-guide-employers?lang=en

Guideline G-P2-21 Communicable disease prevention:

https://www.worksafebc.com/en/law-policy/occupational-health-safety/searchable-ohs-regulation/ohs-guidelines/guidelines-for-workers-compensation-act#SectionNumber:G-P2-21

### **B) CONTACT**

If there are any questions regarding the items noted in this inspection report, please contact:

Jonathan Truefitt, B.Sc., CIH, ROH - Occupational Hygiene Officer - WorkSafeBC

E-mail: jonathan.truefitt@worksafebc.com

Mail: P.O. Box 5350 Stn. Terminal, Vancouver, B.C. V6B 5L5

Phone: 604.244.6486 Fax: 604.232.1558

For more information on occupational health and safety, visit: www.worksafebc.com



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# **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
WCA21(1)(a)	Referenced in regards to communicable disease prevention.
Every employer must ensure the health and safety of all workers working for that employer, and any other workers present at a workplace at which that employer's work is being carried out.	



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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
3	

Inspection Report Delivered To	Employer Representative Present During Inspection	Worker Representative Present During Inspection	Labour Organization & Local
Paul Nakagawa Paul Nakagawa		Not Applicable	

WorkSafeBC Officer Conductin	ng
Jonathan Truefitt	

*Inspection Time	*Travel Time
0.50 hrs	0.00 hrs

<sup>\*</sup>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.

# Request a 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 Office at 1-800-925-2233.

To submit a request online, visit https://www.worksafebc.com/en/review-appeal/submit-request

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