

Operations Division Occupational Health and Safety

Field Visit Report

Page 1 of 3

OHS Case ID: **02881PRMX738**
Field Visit no: **02881PSBC756** Visit Date: **2020-OCT-06** Field Visit Type: **CONTINUATION**

Workplace Identification: **GRAND RIVER HOSPITAL** Notice ID:
835 KING ST W, KITCHENER, ON, CANADA N2G 1G3

Telephone: **(519) 742-3611** JHSC Status: **Active** Work Force #: **1000** Completed %:

Persons Contacted: **MARC SIMARD, DIRECTOR EMPLOYEE HEALTH AND WELLNESS; MARINA VUJISIC, WORKER CO-CHAIR ON JHSC; JENNIFER CEPUKAS, WORKER MEMBER OF JHSC, TARA ILAY, H&S CONSULTANT**
Visit Purpose: **CONTINUATION**
Visit Location: **TELECONFERENCE**
Visit Summary: **ORDERS ISSUED. SEE NARRATIVE.**

Detailed Narrative:

Purpose of this visit was to follow up on employer's action plan and to further discuss steps taken by JHSC. This is continuation of field visit conducted on September 29, 2020 (see field visit 02881PRRX739).

The employer was reminded that section 9 (18) of the OHS gives power to JHSC to:

- identify situations that may be a source of danger or hazard to workers;
- make recommendations to the employer and the workers for the improvement of the health and safety of workers;
- obtain information from the constructor or employer respecting:
 - the identification of potential or existing hazards of materials, processes or equipment, and
 - obtain information from the employer concerning the conducting or taking of tests of any equipment, machine, device, article, thing, material or biological, chemical or physical agent in or about a workplace for the purpose of occupational health and safety

In order for the JHSC to fulfill its function under section 9 the employer shall afford assistance and co-operation to a committee and a health and safety representative in the carrying out by the committee and the health and safety representative of any of their functions.

It was established that employer didn't afford full assistance to JHSC in carrying out its power to provide recommendations to the employer respecting the use of adequate face masks at this workplace. In addition, it was established that employer didn't provide full information on potential hazards of face masks currently used at this workplace and didn't provide full information concerning testing of the face masks both currently owned and proposed by the employer. - Order issued.

In addition, every employer in consultation with the joint health and safety committee and upon consideration of the recommendation thereof, shall develop, establish and put into effect measures and procedures in writing for the health and safety of workers in respect to the reporting of unsafe or defective devices, equipment or work surfaces; the purchasing of equipment that is properly designed and constructed; and the

Recipient	Inspector Data	Worker Representative
Name _____	ZELJKO ILINCIC OCCUPATIONAL HEALTH & SAFETY INSPECTOR PROVINCIAL OFFENCES OFFICER 4273 King St. E, #300, Kitchener, ON N2P 2E9 MOLOHSWaterloo@ontario.ca Tel: (519) 239-8054 Fax: (519) 883-5694	Name _____
Title _____		Title _____
Signature _____	Signature _____	Signature _____

You are required under the Occupational Health and Safety Act to post a copy of this report in a conspicuous place at the workplace and provide a copy to the health and safety representative or the joint health and safety committee if any. Failure to comply with an order, decision or requirement of an inspector is an offence under Section 66 of the Occupational Health and Safety Act. You have the right to appeal any order or decision within 30 days of the date of the order issued and to request suspension of the order or decision by filing your appeal and request in writing on the appropriate forms with the Ontario Labour Relations Board, 505 University Ave., 2nd Floor, Toronto, Ontario M5G 2P1. You may also contact the Board by phone at (416) 326-7500 or 1-877-339-3335 (toll free), mail or by website at <http://www.olrb.gov.on.ca/english/homepage.htm> for more information.

The Government of Ontario wants to hear from you. You can provide feedback on this visit at 1-888-745-8888

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Workplace Identification: **GRAND RIVER HOSPITAL
835 KING ST W, KITCHENER, ON, CANADA N2G 1G3**

Notice ID:

use, wearing and care of personal protective equipment and its limitations.

It was established that employer didn't establish written measures and procedures respecting reporting of defective face masks and the purchasing of face masks that are appropriate to protect workers. - Order issued.

Recipient	Inspector Data	Worker Representative
Name _____	ZELJKO ILINCIC OCCUPATIONAL HEALTH & SAFETY INSPECTOR PROVINCIAL OFFENCES OFFICER	Name _____
Title _____	4273 King St. E, #300, Kitchener, ON N2P 2E9 MOLOHSWaterloo@ontario.ca Tel: (519) 239-8054 Fax: (519) 883-5694	Title _____
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835 KING ST W, KITCHENER, ON, CANADA N2G 1G3

Order(s) /Requirement(s) Issued To:

To: **GRAND RIVER HOSPITAL CORPORATION** Org/Ind Role **Owner**

Mailing Address:
835 KING ST W, KITCHENER, ON, CA N2G 1G3

Order(s) /Requirement(s) Description:
You are required to comply with the order(s) /requirement(s) by the dates listed below.

No	Type Code	ActReg	Year	Sec.	Sub Sec.	Clause	Text of Order/Requirement	Comply by Date
1	Time	OHSA	1990	25	2	e	The employer shall afford assistance and co-operation to the JHSC at this workplace. In particular the employer shall provide all available information on potential hazards of the face masks currently used at this workplace and provide all available information concerning testing of the face masks both currently owned and the substitute masks proposed by the employer. It was established that the JHSC was requesting information and it was not being fully provided.	2020-OCT-08
02881PSBC757								
2	Time	OHSA	1990				The employer shall in consultation with the joint health and safety committee and upon consideration of the recommendation thereof, shall develop, establish and put into effect measures and procedures for the health and safety of workers respecting reporting of defective face masks and evaluation of replacement masks to ensure they are appropriate to protect workers. At the time of inspection, such measures and procedures did not exist.	2020-OCT-13
02881PSBC758		67	1993	8				

Recipient Name _____ Title _____ Signature _____	Inspector Data ZELJKO ILINCIC OCCUPATIONAL HEALTH & SAFETY INSPECTOR PROVINCIAL OFFENCES OFFICER 4273 King St. E, #300, Kitchener, ON N2P 2E9 MOLOHSWaterloo@ontario.ca Tel: (519) 239-8054 Fax: (519) 883-5694 Signature _____	Worker Representative Name _____ Title _____ Signature _____
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