

Operations Occupational  
Division Health and Safety

Field Visit Report

OHS Case ID: **00588PJKT116**  
Field Visit no: **00588PJKT117** Visit Date: **2020-MAY-06** Field Visit Type: **INITIAL**

Workplace Identification: **PETERBOROUGH REGIONAL HEALTH CENTRE** Notice ID:  
**1 HOSPITAL DRIVE, PETERBOROUGH, ON, CANADA K9J 7C6**

Telephone: **(705) 743-2121** JHSC Status: **Active** Work Force #: **2500** Completed %:

Persons Contacted: **CALVIN CATHCART, SAFETY OFFICER, KELLY HENWOOD, WORKER CO-CHAIR JHSC**  
Visit Purpose: **TO DETERMINE COMPLIANCE THE OCCUPATIONAL HEALTH AND SAFETY ACT AND APPLICABLE REGULATIONS**  
Visit Location: **BY TELEPHONE AND EMAIL**  
Visit Summary: **1 ORDER ISSUED. NOTICE OF COMPLIANCE FORM TO BE SIGNED BY MANAGEMENT AND WORKER REP JHSC WHEN ORDER IS COMPLIED WITH AND FAXED OR EMAILED TO THE MINISTRY OF LABOUR, TRAINING & SKILLS DEVELOPMENT. A COPY OF THIS REPORT IS TO BE POSTED SO THAT OTHER WORKERS MAY READ.**

Detailed Narrative:

This field visit took place over the phone and the following people were spoken to:

Calvin Cathcart, Safety Officer, Kelly Henwood, Worker Co-Chair JHSC

The reason for this visit is to respond to a complaint made to the Ministry of Labour, Training, and Skills Development. The worker alleges that the employer is refusing to inform the JHSC and applicable unions of the names of workers who have tested positive for COVID19 in the workplace.

Inspector Findings:

Joint Health and Safety Committee

The employer provided by email a written Notice of Occupational Illness on April 9, 2020 as per Section 52(2) of the Occupational Health and Safety Act to the Ministry of Labour, Training & Skills Development. The written notice contained all requirements as per Section 5(5) of the Regulations for Health Care and Residential Facilities. It contained information regarding two workers who had contracted COVID-19 at the workplace.

The employer provided a written Notice of Occupational Illness to the Joint Health and Safety Committee Co-chair and to the union of the workers involved. However the names of the workers were redacted (blacked out). Section 5(5)(e) requires that the name and address of the worker who is suffering from the occupational illness is included (order issued).

Infection Control

As a result of the workers testing positive, the employer required:

- Masks to be worn at all times on the unit
- Workers with close contact and asymptomatic to be swabbed and can continue to work

Recipient	Inspector Data	Worker Representative
Name: <u>Calvin Cathcart</u>	<b>TRACY KELLY</b> OCCUPATIONAL HEALTH & SAFETY INSPECTOR PROVINCIAL OFFENCES OFFICER	Name: <u>Kelly Henwood</u>
Title: <u>Safety Officer</u>	300 Water St 3rd Flr, Peterborough ON K9J 8M5 HSPeterboroughDistrict@ontario.ca Tel: (705) 760-6117 Fax: (705) 755-4724	Title: <u>RW Worker Co-Chair</u>
Signature: <u>Calvin Cathcart</u>	Signature	Signature: <u>[Handwritten Signature]</u>

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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- Workers with no close contact and asymptomatic can continue to work
- Worker symptomatic to be swabbed and remain away from the workplace

Social Distancing

- Employer also reviewed social distancing requirements

Resources that may assist workers and employers:

Ministry of Health Emergency Planning and Preparedness  
<<http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/Default.aspx>>

Public Health Ontario  
<<https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus>>

Health and Safety System Partners  
<<http://www.healthandsafetyontario.ca/>>

Additional Guidance  
[www.ontario.ca/coronavirus](http://www.ontario.ca/coronavirus) <<http://www.ontario.ca/coronavirus>>

You may also contact Telehealth Ontario at 1-866-797-0000

Recipient	Inspector Data	Worker Representative
Name <u>Cabria Colthca</u>	<b>TRACY KELLY</b> OCCUPATIONAL HEALTH & SAFETY INSPECTOR PROVINCIAL OFFENCES OFFICER	Name <u>Kelly Henwood</u>
Title <u>Safety Officer</u>	300 Water St 3rd Flr, Peterborough ON K9J 8M5 HSPeterboroughDistrict@ontario.ca	Title <u>RW Worker Co-Chair</u>
Signature <u>Cabria Colthca</u>	Tel: (705) 760-6117 Fax: (705) 755-4724	Signature <u>[Handwritten Signature]</u>

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Page 3 of 3

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Notice ID:

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

To: PETERBOROUGH REGIONAL HEALTH CENTRE FOUNDATION

Org/Ind Role  
Primary Employer

Mailing Address:

1 HOSPITAL DR, PETERBOROUGH, ON, CA K9J 7C6

Order(s) /Requirement(s) Description:

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

No	Type Code	Act/Reg	Year	Sec.	Sub Sec.	Clause	Text of Order/Requirement	Comply by Date
1	Time 00588PJKT118	OHSA	1990	52	2		<b>If an employer is advised by or on behalf of a worker that the worker has an occupational illness, the employer shall give notice in writing, within four days of being so advised, to the committee and to the trade union, containing such information and particulars as are prescribed.</b>	2020-MAY-15

**The written notice provided to the joint health and safety committee did not contain all prescribed information.**

**This order shall be complied with by May 15/20.**

Recipient	Inspector Data	Worker Representative
Name: <u>Col Cathcart</u>	<b>TRACY KELLY</b> OCCUPATIONAL HEALTH & SAFETY INSPECTOR PROVINCIAL OFFENCES OFFICER 300 Water St 3rd Flr, Peterborough ON K9J 8M5 HSPeterboroughDistrict@ontario.ca Tel: (705) 760-6117 Fax: (705) 755-4724	Name: <u>Kelly Hemwood</u>
Title: <u>Safety officer</u>		Title: <u>RW IHSC worker Co-chair</u>
Signature: <u>Col Cathcart</u>	Signature	Signature: <u>[Handwritten Signature]</u>

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