# How do l advocate for improvements?

John Oudyk, MSc CIH ROH

Occupational Hygienist

May 26, 2022





# How do I advocate for improvements?

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## outline

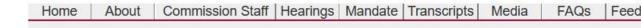
- History & political-economic-bureaucratic context
- IRS & the 3 R's
- Knowledge activism



#### THE SARS COMMISSION

THE HONOURABLE ARCHIE CAMPBELL, COMMISSIONER

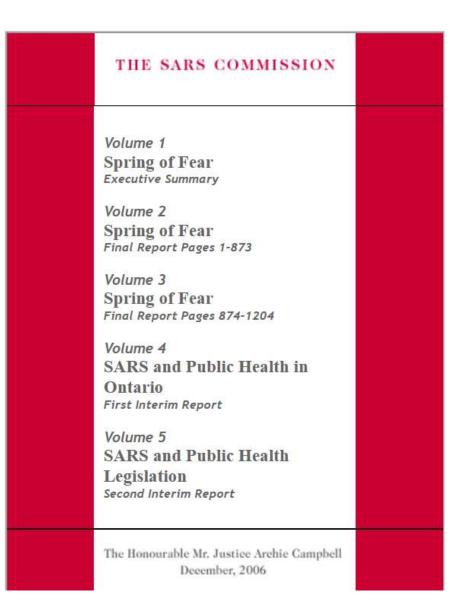
This website was transferred to the Archives of Ontario in October of 2008. It is no longer being updated so forms, search boxes, and external links may not function



 The Campbell Commission recognized the conflict between the way the two

SARS1

- disciplines (H&S and IPAC) make decisions under scientific uncertainty
- Recommended the "precautionary principle" (H&S) should prevail & H&S and IPAC need to work together – IPAC folks took offense
- While originally the Campbell Commission recommendations were implemented, the changes were gradually eroded and H&S was put back into the "back seat" (where we are now)





# SARS Commission Findings

- H&S took the **backseat** to IPAC
- MOL took the backseat to MOH
- The scientific evidence for airborne transmission was fraught with **uncertainty** (scientific opinion was split)
- Justice Campbell recommended that in such circumstances of scientific uncertainty the precautionary principle should prevail
- Infections/deaths could have been avoided if this approach had been taken
- H&S & IPAC need to work together

#### "Those who cannot remember the past are condemned to repeat it"

(George Santayana, The Life of Reason: Reason in Common Sense. Scribner's, 1905: 284)

## nH1N1\_2009 (swine flu) – an opportunity to apply what we learned from SARS1

- This was our first chance to apply what we learned from SARS1
- For the first wave we did well
- N95's required for any HCW with suspected patient contact
- PAPR's recommended for AGMP's
- Once the vaccines came out during the 2<sup>nd</sup> wave, the recommendations were practically ignored and H1N1 blended into the seasonal flu
- Response to the first wave was generally considered a success (we learned something from SARS1 and were able to apply it); the second wave experience is usually ignored



look for your PAPRs in storage



## ONA Update Bulletin: Aug 2009 What's New on the Flu: Update

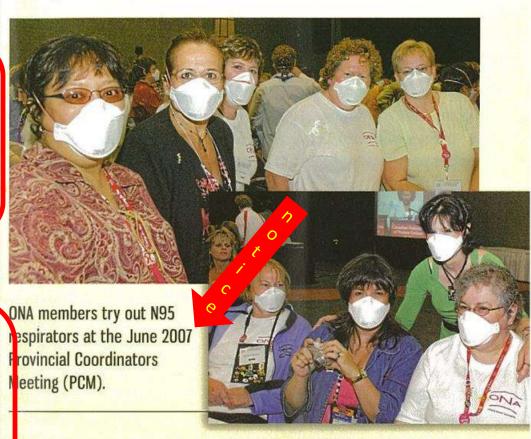
**ONA** members should be working with your Bargaining Unit leaderone on the ship to identify and raise any health and safety concerns regarding the employer's readiness to protect workers from exposure to this and other infectious diseases.

In this feature section, we've developed a checklist to protect you from infectious diseases, including influenza, in your workplace. See page 6.

The Ministry of Health and Long-Term Care (MOHLTC) has recommended employers maintain a four-week supply of personal protective equipment (PPE) to be available for use during a pandemic. Ontario employers who planned appropriately should not be running out of PPE even before the province has declared a pandemic. Accordingly, we recommend each member works with your facility's Joint Health and Safety Committee (JHSC) to demand your employer, in consultation with your JHSC, develops and implements full pandemic plans including:

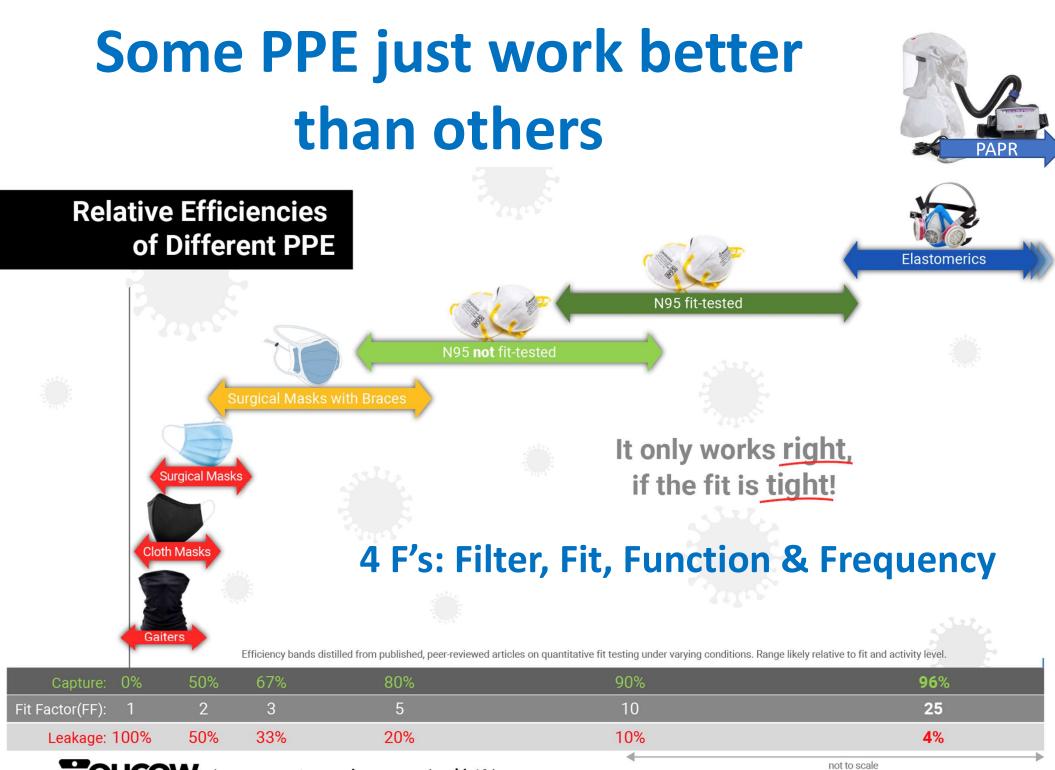
- Conducting risk assessments.
- Identifying health care workers who may be exposed to this influenza.
- Equiping any health care workers at risk of exposure with proper PPE, including at least properly fitted N95 respirators. The equipment must offer adequate protection to workers at risk. At minimum, properly fitted National Institute for Occupational Safety and Health (NIOSH)-approved N95 respirators, not surgical masks, must be provided for all health care workers at risk of exposure. If the virus becomes virulent, workers performing or assisting with high-risk procedures should be provided with powered air-purifying respirators (PAPR). Your employer's pandemic plan should include provisions for stockpiling at least four weeks supply of necessary protective equipment. Training should be provided on the use, care

If your health and safety issues remain unresolved, please contact your Bargaining Unit President, who can work with the ONA Labour Relations Officer (LRO) in considering options, including possible grievances and Ministry of Labour (MOL) intervention.



#### **Lessons from SARS**

Cudden Acute Respiratory Syndrome (SARS) was a health and



CHCOW Learn more at www.ohcow.on.ca/covid-19/

# Where are we now?

**Feb 2020**: still requiring HCWs to use **N95s** for pandemic influenza suspected/confirmed patients (supply problems) – **AIIR** also prescribed

March 12, 2020: Directive #1 declares droplet/contact transmission so no N95s, no need for AIIR rooms – "precautionary principle" appealed to (we have save N95s for AGMPs as a "precaution") - MOL declares it is in the backseat to the MOH on pandemic issues (COVID-19 is not an "occupational disease" even though WSIB starts compensating workrelated cases)

Mar 30 2020: ONA & MOH joint statement on using PCRA (point of care risk assessment) to determine PPE needs

May 2021: no change in PPE strategy for new variants (droplet/ contact precautions)

**Dec 2021**: with Omicron, recognizing the **benefits of a "tight fitting" mask** – **HCWs "allowed" to use N95s** (but mention that there's "no convincing evidence" that N95s are better than surgical masks)

**Mar 2022**: reconfirmed that there is "**no convincing evidence**" that N95s are better than surgical masks – tight fitting still recognized as better (even though no "convincing evidence" for that either)

So, what tools do we have in our H&S rep toolbox?:

- The philosophy behind the law is known as the 'internal responsibility system' (IRS).
- Although this term is not mentioned in any legislation, but the Ministry of Labour's guide to the Act makes it clear that the government expects employers and workers to cooperate to control occupational health and safety hazards.
- The IRS is based on the new rights know as the **3 R's**:
  - Right to know
  - Right to participate
  - Right to refuse

# Elliot Lake H&S Strike



Report of the Royal Commission on the Health and Safety of Workers in Mines

James M. Ham Commissioner

Frederick R. Hume, qc Counsel Dr Cameron C. Gray Medical Consultant

Arthur L. Gladstone Executive Secretary

Jean Beaudry Labour Adviser Edmund A. Perry, P.Eng. Engineering Adviser R. Peter Riggin Industrial Adviser



# Ham's view of the Internal Responsibility System (IRS)



 Based on natural justice – right to know, right to participate, right to refuse (3 R's – originally devised by Bob Sass in Saskatchewan)

participation is predictated on:

- 1. having a certain level of knowledge
- 2. exercising contributive responsibility
- 3. exercising direct responsibility
- Workers, management and MOL have all three modes of participation, "worker auditors"/JH&SC only have first two

#### "law is the conscience of those who have none" (1983 IAPA Conference)

# Ham's vision of JHSC/Worker Auditor

- "Worker auditor" investigate and address specific issues/incidents
- JH&SC audit the higher level/"policy" issues in preference over the specifics
- Along with the MOL inspectorate, they formed the internal and external audit function to ensure the functioning of the IRS – they are not the IRS, they only monitor its health
- "The Commission is strongly convinced that there is emphatically no place for the adversary system of collective bargaining in dealing with matters of health and safety." (p.157)



## one big happy family – no place for politics in H&S





group

# ... but, what does the evidence say?



# SPR (1985-86) Survey of JH&SC's:

- survey of Ontario 3000 JH&SC's did <u>not</u> find evidence to support James Ham's views;
  - "Instead, these results suggest that the advantages of using the structures of collective bargaining and the skill repertoire of those in the collective bargaining milieu may in most cases off-set any disadvantage of the conflictnegotiation model." (p. 150).



# Tuohy & Simard (1993) Evaluation of JH&SCs:

 survey of 900 Ontario workplaces – adversarial relations are not a liability.

#### "protagonistic" committee relations

"We choose this term since this factor indicates the presence of strong protagonists on both manager and worker sides. Adversarialism and collaboration are often presented in the industrial relations literature as alternative strategies. It appears, however, that adversarial and collaborative behaviour tend to be found together. These types of behaviour may reflect the intensity with which committee debates and discussions are carried out." (p.6)



## SOOOO0 ...

adversarial/protagonistic modes of intense debate can make a positive contribution to H&S and thus have their place

... yes, we need to strive together, but there can be times to take a hardline



# **Robert Sass:**



https://leaderpost.com/news/ saskatchewan/canada-150robert-sass

- Bob Sass, who used to be the Minister of Labour in Saskatchewan in the 1970's; he was the original architect of the 3 R's.
- When asked about the 3 R's now, he says he is disillusioned with the way these rights have actually worked themselves out in regulations
- He feels the 3 **R**'s have co-opted by the 3 **C**'s: collusion (bi- or tri-partism, employers & researchers) corruption (H&S establishment, consultants) criminality (Westray, COVID?)

# Latest trend: downloading responsibility for assessing the risks & taking precautions to the individual – "responsibilization" https://www.canada.coden/putri health/services/putritions/court

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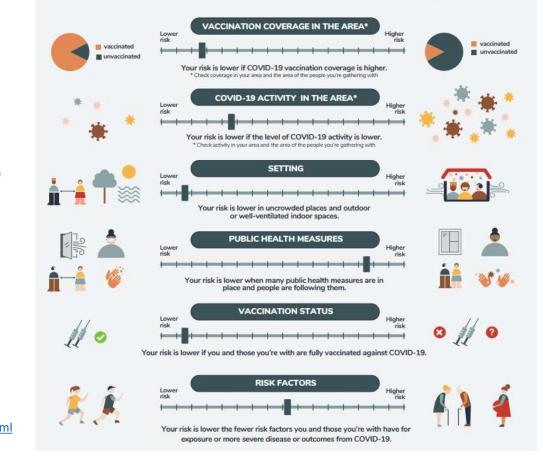
#### Going out? Do it safely.

Public health advice across Canada may be different depending on where you live. This tool will help you:

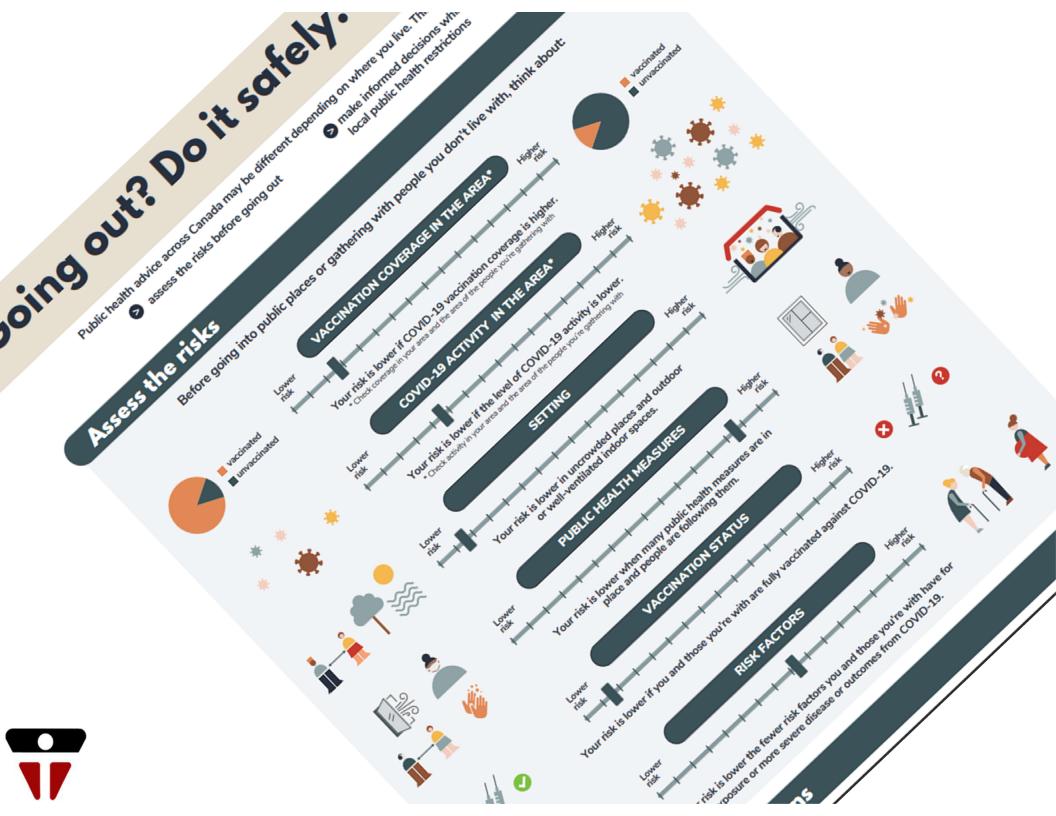
 assess the risks before going out
 make informed decisions while considering local public health restrictions

#### Assess the risks

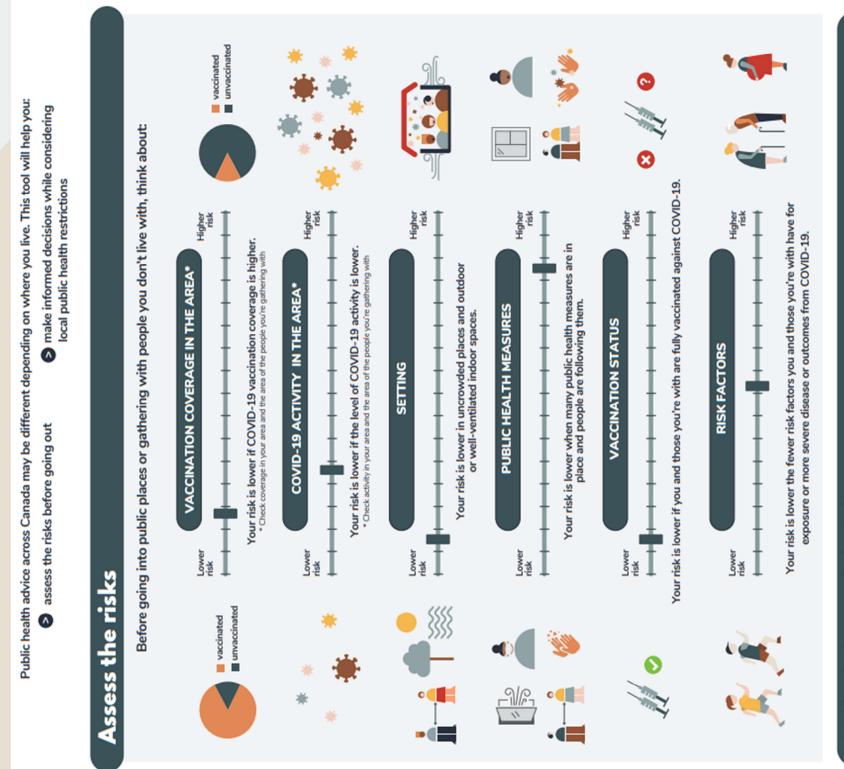
Before going into public places or gathering with people you don't live with, think about:



#### **Make informed decisions**







Going out? Do it safely.

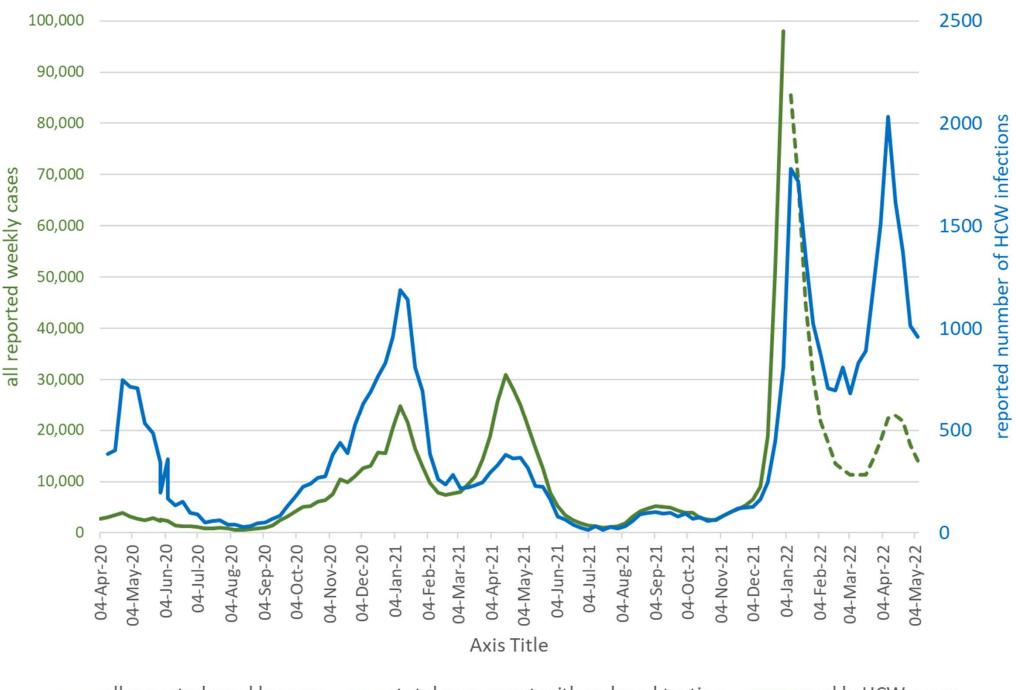
## It takes all of them together:

#### we need every layer to make protection better





#### weekly Ontario reported COVID-19 infections



all reported weekly cases
 --- total case count with reduced testing
 weekly HCW cases

## So, where are we now?

- To date over 50,000 HCWs have been infected with COVID
- The WSIB has compensated over 22,000 of those cases
- The number of HCW deaths due to COVID is hard to find (maybe ONA has that number?)

How many infections/deaths have to happen before we admit the failure of IPAC measures?



# Approaches to addressing workplace H&S:

 Current trend is to put all the responsibility on the individual – ignoring the social context/responsibilities -> "responsiblization"

#### examples:

- enforcing masking (individual responsibility) but not ventilation (organization/social responsibility)
- lax enforcement of regulations and directives (unions taking the employer to court to enforce COVID directives)

#### **Styles of H&S representation:**

**Technical-legal approach** – obsessive rule following behaviour **Knowledge activist approach** – problem-solving and mobilization



A Hall, A Forrest, A Sears and N Carlan, "Making a Difference: Knowledge Activism and Worker Representation in Joint OHS Committees." *Industrial Relations*, Summer 2006, Vol. 61 Issue 3, pp. 408-436



https://socialsciences.mcmaster.ca/labour-ohcow-academic-research-collaboration-loarc

#### Styles of worker H&S representation Technical legal Knowledge activist

Research Article https://onlinelibrary.wiley.com/doi/10.1002/ajim.22520

#### Identifying knowledge activism in worker health and safety representation: A cluster analysis

Alan Hall ⊠, John Oudyk, Andrew King, Syed Naqvi, Wavne Lewchuk

First published: 25 August 2015 Full publication history

DOI: 10.1002/ajim.22520 View/save citation

Cited by (CrossRef): 0 articles for updates





View issue TOC Volume 59, Issue 1 January 2016 Pages 42–56 https://loarc.mcmaster.ca/documents/20 16-loarc-workers-guide-1-170609.pdf

# Health and safety representation

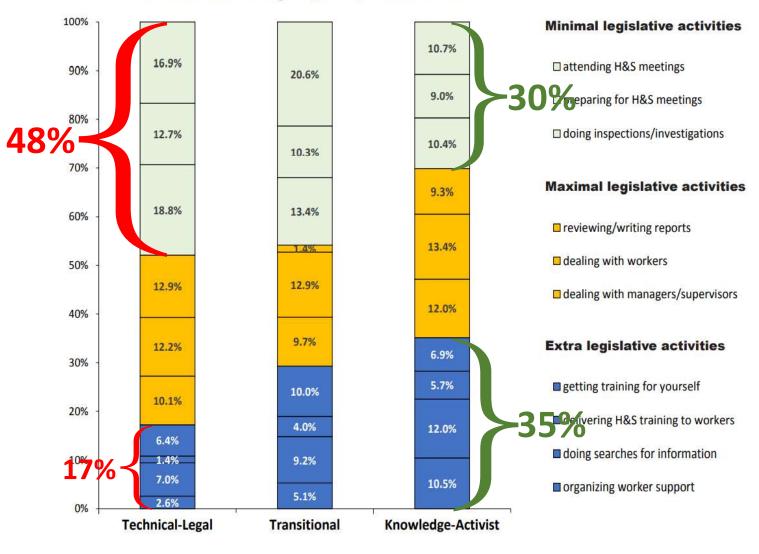
WRITING THE WORKERS BACK IN



Funding Information

#### Proportion of Time Spent on Health and Safety Representation Tasks

## What do you spend your time on?



T

- 1. Research
- 2. More than just meetings
- 3. Mobilize your influence
- 4. Listen to workers
- 5. Address authority
- 6. Build trust
- 7. Be assertive
- 8. Build solutions
- 9. Use inspections & minutes
- 10. Use the law strategically

#### Ten operating principles for guiding effective participation

From the survey and stories, we started to see similarities in the elements that made knowledge activist representatives more effective and successful. We were able to summarize them:

- Research: Strategically conduct and use research to make claims, present solutions, and build legitimacy and trust.
- More than just meetings: Emphasize the importance of working with and outside committees. Effective representation requires an activist approach.
- Mobilize your influence: Recognize and understand the challenges and consequences of representation. Know how to mobilize influence using knowledge, the law and worker support. Be prepared for push back from some in management.
- 4. Listen to workers: Making change requires listening to and acknowledging concerns of other workers. Build from their experience and engage them with education that is needed. Train co-workers in health and safety. Engage them in the monitoring and change process.

- Address authority: Understand that influencing management requires an ongoing effort to educate and influence their way of seeing things (e.g. constantly reinforce messages like health and safety pays).
- Build trust: Recognize the importance of building relationships in the committee and in the workplace and build trust, mutual respect and legitimacy.
- Be assertive: Be assertive, persistent and keep your cool. Be diplomatic. Figure out how to move forward over the long term if there is resistance. If you draw a bottom line, have a strategy to defend that bottom line.
- Build solutions: Don't just identify the problem. Provide and work with management to develop solutions that address the source of the hazard.
- 9. Use inspections and minutes: Recognize the value of inspections, reports and minutes but do not define your role just in these terms. Beware management efforts to confine your activities to a technocratic or bureaucratic box (i.e. keeping reps busy with reports, imposing long drawn out processes for decision-making, responding to numerous minor issues and limiting access to shop-floor or workers).
- 10. Use the law strategically: Recognize the limitations of the law but know and use the law and regulations where they provide leverage. Develop a relationship of trust with local MOL inspectors and use that relationship tactically and strategically.

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**1.** *Research:* Strategically conduct and use research to make claims, present solutions, and build legitimacy and trust.



CSA

Group

Heneghan and colleagues' systematic review WHO, published in March, 2021, as a preprint, lack of recoverable viral culture samples of ' prevents firm conclusions to be drawn abc transmission".<sup>1</sup> This conclusion, and the wide of the review's findings, is concerning bec public health implications.

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#### **Respiratory Protection Program Component Checklist**

#### How to Use this Checklist

Each numbered item below is a component that must be included in the respiratory protection program.

Each check box under the number components indicates what you should expect to be included under each required component.

1. Roles & Responsibilities
Employer
Program Administrator (PA)
Employee
□ Supervisor
Person Selecting Respirators

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2

2. More than just meetings: Emphasize the importance of working with and outside committees. Effective representation requires an activist approach.
5 D's:



## Deflect, Defer, Distract, Dissuade, and Deter

were able to summarize them:

https://journals.sagepub.com/doi/pdf/10.1177/09646639221099361

http://sidneydekker.com/wp-content/uploads/2014/08/BureaucratizationSafety.pdf

#### The bureaucratization of safety



Sidney W.A. Dekker\*

Griffith University, Brisbane, Australia The University of Queensland, Brisbane, Australia

#### ARTICLE INFO

Article history: Received 11 December 2013 Received in revised form 4 July 2014 Accepted 14 July 2014

#### **How Bureaucracy Can Foster Burnout**

https://scholarworks.iupui.edu/bitstream/handle/1805/18199/G underman-2018-How-Bureaucracy.pdf?sequence=1&isAllowed=n

Richard B. Gunderman, MD, PhD<sup>a</sup>

James W. Lynch, MD<sup>b</sup>

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**3.** *Mobilize your influence:* Recognize and understand the challenges and consequences of representation. Know how to mobilize influence using knowledge, the law and worker support. Be prepared for push back from some in management.

#### from: Walter's story

*Mobilize influence:* It took almost two years of doggedly working with the local union, international union, OHCOW and city administration to get the program up and running, but Walter also visited every fire hall to listen to firefighter concerns and stories, and to encourage their active support for the initiative. **Report it All in August!** Campaign to have everyone report everything for a limited period of time (1 month?) rather than expect everyone to report everything all the time. **Clog up the bureaucratic** channels



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**4.** *Listen to workers:* Making change requires listening to and acknowledging concerns of other workers. Build from their experience and engage them with education that is needed. Train co-workers in health and safety. Engage them in the monitoring and change process.

#### **Problem Finder**

- always on the lookout for a new problem
- collects information (e.g., internet)
- unwilling to accept responsibility for solution
- victim mentality

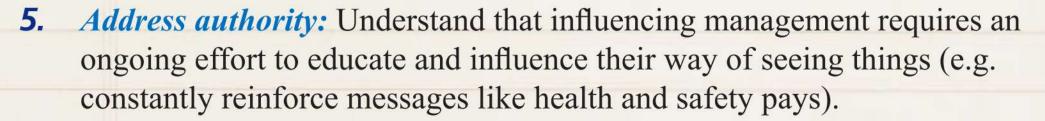


### Problem Solver

- likes to fix problems
- doesn't need too much information (just the essentials)
- may deny a problem exists if it can't be fixed
- "git-R-done" attitude

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#### figure out **what motivates** the employer:

- compliance with the law (minimal or less)?
- bureaucracy, checklists, procedures (SOPs)?<sup>\*</sup>
- ➤sense of morals/conscience/altruism?
- ➤economic bottom-line?
- ≻power?
- ≻efficiency?
- ≻expediency?

- 4. Listen to workers: Making change requires listening to and acknowledging concerns of other workers. Build from their experience and engage them with education that is needed. Train co-workers in health and safety. Engage them in the monitoring and change process.
- Address authority: Understand that influencing management requires an ongoing effort to educate and influence their way of seeing things (e.g. constantly reinforce messages like health and safety pays).
  - **Build trust:** Recognize the importance of building relationships in the committee and in the workplace and build trust, mutual respect and legitimacy.

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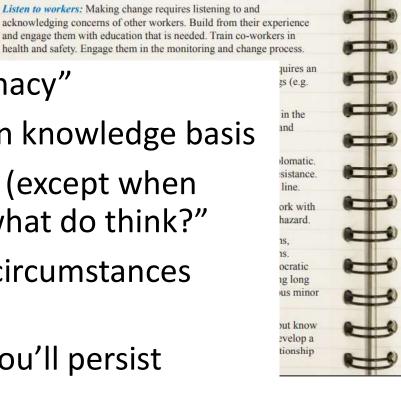
- **Be assertive:** Be assertive, persistent and keep your cool. Be diplomatic. Figure out how to move forward over the long term if there is resistance. If you draw a bottom line, have a strategy to defend that bottom line.
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- 9. Use inspections and minutes: Recognize the value of inspections, reports and minutes but do not define your role just in these terms. Beware management efforts to confine your activities to a technocratic or bureaucratic box (i.e. keeping reps busy with reports, imposing long drawn out processes for decision-making, responding to numerous minor issues and limiting access to shop-floor or workers).
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- **Build trust:** Recognize the importance of building relationships in the 6. committee and in the workplace and build trust, mutual respect and legitimacy.
- Things that can build trust, respect & legitimacy"
- taking training together build a common knowledge basis
- sharing information not as ammunition (except when needed) rather, ask "have you read this? what do think?"
- $\succ$  save the protagonistic approach for dire circumstances (don't "cry wolf" to quickly)
- $\succ$  respect also comes from them knowing you'll persist



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7. *Be assertive:* Be assertive, persistent and keep your cool. Be diplomatic.Figure out how to move forward over the long term if there is resistance.If you draw a bottom line, have a strategy to defend that bottom line.

## **Caricatures of conflict attitudes**

- sheep "door mat"
- ostrich head stuck in the sand
- shark aggressive

fox

- crafty (untrustworthy)
- owl "wisdom" (win-win)
- bulldog won't let go until it's resolved



Ten operating principles for guiding effective participation

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- **8.** *Build solutions:* Don't just identify the problem. Provide and work with management to develop solutions that address the source of the hazard.
- Remember the problem finder & problem solver balance?
- The solution should appeal to **what motivates the employer** (principle #5 above)
- Tap into **networks** (union, CCOHS, OHCOW, WHSC, PSHSA, etc.) to find possible solutions (get new ideas)

consequences of representation. Know how to mobilize influence using knowledge, the law and worker support. Be prepared for push back from some in management.

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- Offering to **take the minutes** for the meeting and/or recording observations during inspections gives you the power to record what you think is important
- Be careful it doesn't become too burdensome (avoid bureaucratic gridlock)

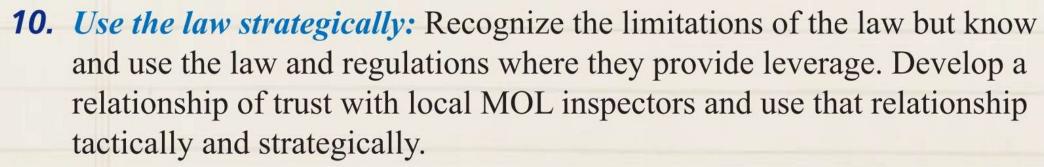
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- The **threat** of call the MOL may be more effective than their actually coming in
- Get to know your inspector and find out what makes them tick

health and safety. Engage them in the monitoring and change process.

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## How about you?

What do you **spend most of your time doing** as a H&S rep?

#### Which **direction** do you tend to?

- a. Let's see what the rules say. (Technical Legal)
- b. Let's get the information and then get the members behind this effort. (Knowledge Activist)

Which **animal characterization** best describes your way of dealing with H&S/IPAC conflicts?



## review

What are the 3 R's? What are the 3 C's? What are the 4 F's? What are the 5 D's?

bonus question: name the 10 operating principles

