

Pebra/Ventra Plastics Worker Information Session



The Occupational Health Clinics for Ontario Workers (OHCOW)

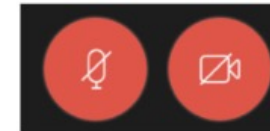
March 8th and March 9th, 2023

Welcome!

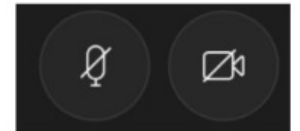
Please Note: We are recording this meeting.

- Any personal health information that you share in this space will be recorded.
- If you do not want to have your image and/or voice recorded, please turn your camera off and mute yourself.
- Feel free to call us with any questions about this after the session.

Muted,
video off



Unmuted,
video on



If you are dialling in,
Press * 6 to mute/unmute

We want to hear from you!

- We will review a lot of information in this session.
- Please do not hesitate to contact us with any follow-up questions.



Email: peterborough@ohcow.on.ca

Phone: 705-749-3444 (Jessica Montgomery)

Outline

- Welcome and Introductions (25 min.)
- The OHCOW Process (15 min.)
- Break and Questions (15 min.)
- Salivary Gland Cancer - Case Series (15 min.)
- Asbestos Investigation (15 min.)
- Next-Steps (5 min.)
- Question and Answer Session (15 min.)



Pebra/Ventra - Workers' Voices

Many different illnesses have been reported, including but not limited to:

- **Cancer**
 - Lung
 - Salivary Gland
 - Breast
 - Prostate
 - Among others (e.g., pancreatic, colon, GI)
- **Chronic Toxic Encephalopathy (CTE) - brain injury**
- **Reproductive Issues**
- **Cardiovascular disease**
- **Asthma**
- **Headaches**
- **Musculoskeletal Issues**



Pebra/Ventra Worker Obituaries

Pebra/Ventra - Key Exposures

"WE CAN'T BREATHE"

**A RETROSPECTIVE EXPOSURE PROFILE OF THE PEBRA
INC. PLASTICS PLANT IN PETERBOROUGH, ONTARIO
(1986-1996)**

PREPARED BY

Dale DeMatteo, BA, MHSc and Robert DeMatteo, BA, MA, DOHS

AND

**Unifor Local 1987 including: Local President, Mark Clapper, Past
President, Rose Wickman, Dave Gooley, Jackie Dufty, Cecil Firlott,
Karen Quesnel, and Rick McDougal**

FOR

The Occupational Health Clinics for Ontario Workers (June 2020)



Advisory Committee members during risk mapping session

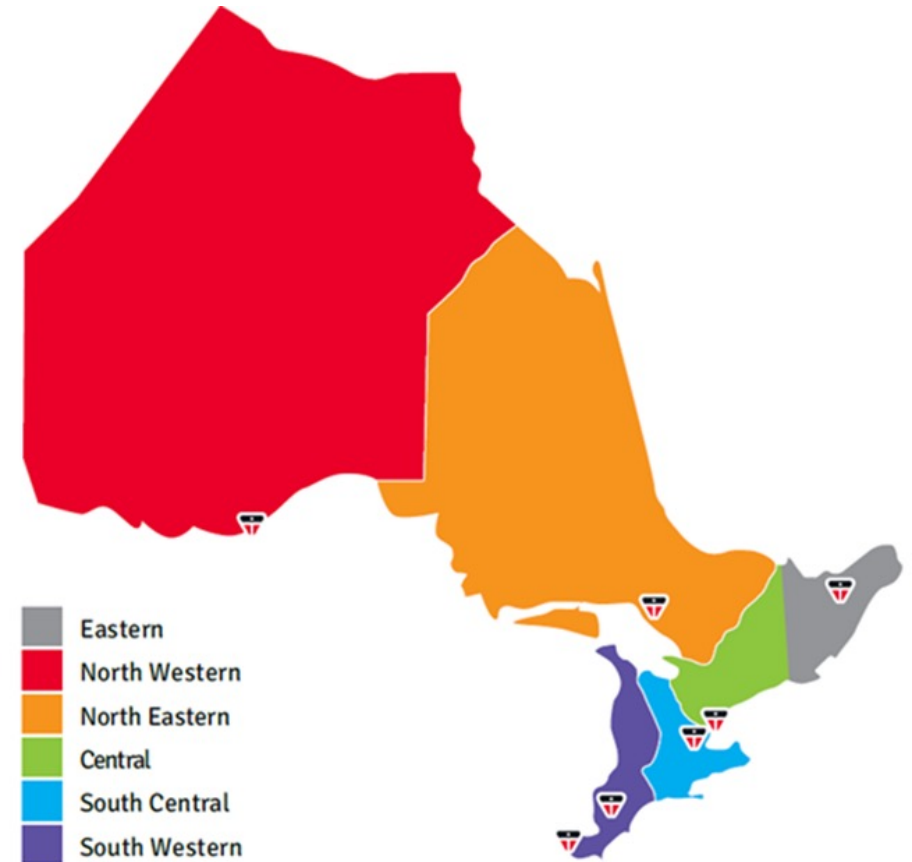
Introduction to OHCOW

Is there a link between my illness and my work?

How do I navigate the WSIB process?

How do I improve safety in my workplace?

- Client Service Coordinator
- Occupational Health Coordinator
- Occupational Health Nurse
- Occupational Health Physicians
- Occupational Hygienists
- Project Directors, Executive Directors

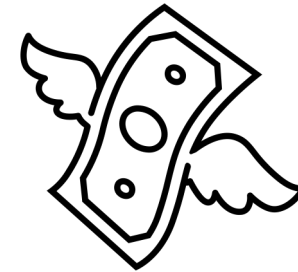
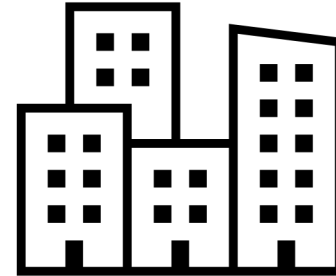


Building our Team

- We are building our team to better support Pebra/Ventra workers moving forward:
 - New Project Directors
 - New Client Services Coordinator
 - New Occupational Health Coordinator
 - New Physicians
 - Nursing and Industrial Hygiene Support Remains
- We are in touch with **Unifor Local 1987** and the Office of the Worker Adviser.

Updates from Dave Wilken

- Peterborough Office Location
- Employer Premiums



The Call Process:

- **Informed Consent:** Workers can expect to receive a call from an OHCOW team member to go over the updated consent forms and privacy policy. **Why is this important?**
- **Health History:** If you have not yet had a health history completed, you will soon be booked in with an **Occ. Health Nurse** to complete one.
- **Work/Exposure History:** You will then be booked in with an **Occ. Hygienist** to review your work and exposure history.
- **WSIB Claim Support:** If you have a confirmed diagnosis but do not yet have a WSIB Claim registered, you will then be scheduled with Jessica Montgomery (**Occ. Health Coordinator**). She can support you in completing the **WSIB Form 6** to initiate a claim and will continue to support you as you navigate the full WSIB process with your legal representative.

Jessica Montgomery
 (Occ. Health
 Coordinator)

WSIB Claim Process:

Initiate a claim: Jessica will be assisting workers with a confirmed diagnosis who have not yet registered a claim with the Workplace Safety and Insurance board by assisting in completing the **Worker's Report of Injury (Form 6)**.

wsib ONTARIO | **Worker's report of injury/disease (Form 6)** **6** Claim number

A. Worker information																																
Last name		First name																														
Address (number, street, apt., suite, unit)			Telephone																													
City/Town		Province	Postal code																													
Job title/Occupation (at the time you were hurt)		Date you started with employer (dd/mm/yy)	How long have you been doing this job for this employer?																													
Only check if you are one of the following: <input type="checkbox"/> executive <input type="checkbox"/> elected official <input type="checkbox"/> owner <input type="checkbox"/> spouse or relative of the employer			Date of birth (dd/mm/yy)																													
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Your preferred language <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Other		Would an interpreter be helpful? <input type="checkbox"/> yes <input type="checkbox"/> no																													
Are you a member of a union? <input type="checkbox"/> yes <input type="checkbox"/> no	Do you authorize your union to represent you in this claim? <input type="checkbox"/> yes <input type="checkbox"/> no	If yes, do you consent to the disclosure of verbal claim file status information to your union representative? <input type="checkbox"/> yes <input type="checkbox"/> no																														
Provide your union name and local																																
B. Employer information																																
Company/Employer name																																
Address																																
City/Town		Province	Postal code																													
Your immediate supervisor's name			Company telephone																													
C. Accident/illness dates and details																																
1. Date and hour of accident/Awareness of illness (dd/mm/yy) <input type="checkbox"/> AM <input type="checkbox"/> PM Date and hour reported to employer (dd/mm/yy) <input type="checkbox"/> AM <input type="checkbox"/> PM		2. Who did you report this accident/illness to? (name and position) Telephone																														
3. Area of injury (body part) - (please check all that apply)																																
<input type="checkbox"/> Head <input type="checkbox"/> Face <input type="checkbox"/> Eye(s) <input type="checkbox"/> Ear(s)	<input type="checkbox"/> Teeth <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Abdomen <input type="checkbox"/> Pelvis	<table border="0"> <tr> <td>Left</td> <td>Right</td> <td>Left</td> <td>Right</td> <td>Left</td> <td>Right</td> <td>Left</td> <td>Right</td> <td>Left</td> <td>Right</td> </tr> <tr> <td><input type="checkbox"/> Shoulder</td> <td><input type="checkbox"/> Arm</td> <td><input type="checkbox"/> Wrist</td> <td><input type="checkbox"/> Hand</td> <td><input type="checkbox"/> Hip</td> <td><input type="checkbox"/> Thigh</td> <td><input type="checkbox"/> Knee</td> <td><input type="checkbox"/> Lower leg</td> <td><input type="checkbox"/> Ankle</td> <td><input type="checkbox"/> Foot</td> </tr> <tr> <td><input type="checkbox"/> Elbow</td> <td><input type="checkbox"/> Forearm</td> <td><input type="checkbox"/> Finger(s)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td><input type="checkbox"/> Toe(s)</td> <td></td> </tr> </table>	Left	Right	Left	Right	Left	Right	Left	Right	Left	Right	<input type="checkbox"/> Shoulder	<input type="checkbox"/> Arm	<input type="checkbox"/> Wrist	<input type="checkbox"/> Hand	<input type="checkbox"/> Hip	<input type="checkbox"/> Thigh	<input type="checkbox"/> Knee	<input type="checkbox"/> Lower leg	<input type="checkbox"/> Ankle	<input type="checkbox"/> Foot	<input type="checkbox"/> Elbow	<input type="checkbox"/> Forearm	<input type="checkbox"/> Finger(s)						<input type="checkbox"/> Toe(s)	
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<input type="checkbox"/> Elbow	<input type="checkbox"/> Forearm	<input type="checkbox"/> Finger(s)						<input type="checkbox"/> Toe(s)																								
<input type="checkbox"/> Other: _____			Are you: <input type="checkbox"/> Left handed <input type="checkbox"/> Right handed																													
4. Did the accident/illness happen on the employer's property or work site? <input type="checkbox"/> yes <input type="checkbox"/> no		Specify where it happened (shop floor, warehouse, client/customer site, parking lot, etc.):																														
5. Did it happen outside the Province of Ontario? <input type="checkbox"/> yes <input type="checkbox"/> no		If yes, indicate where (city, province/state, country):																														
6. Have you hurt this area(s) of your body before? <input type="checkbox"/> yes <input type="checkbox"/> no		7. Do you have any prior related WSIB/WCB claims? <input type="checkbox"/> no <input type="checkbox"/> yes - in Ontario <input type="checkbox"/> yes - outside Ontario																														

Contact accessibility@wsib.on.ca if you require this communication in an alternative format.
 Upload forms and supporting documents online at wsib.ca/upload
 Mail: 200 Front Street West, Toronto, Ontario, M5V 3J1 | Toll free: 1-800-387-0750 | TTY: 1-800-387-0050 | Fax: 1-888-313-7373
 0006A (11/20) Page 1 of 4

What if my Claim is Denied?

Intent to object (if claim is denied): If you received a denial letter from the WSIB, we request that you reach out so we can assist in completing the WSIB's Intent to Object Form.

Once WSIB renders a decision in the claim, there is a **time limit of 6 months to object to the claim**, it is imperative that we do not miss the time limits. Once the objection is received by the board, the clock stops, and this allows for OHCOW to continue to work on the file.

wsib | Intent to object form Claim number
ONTARIO




1. Claim identifiers		
Worker's name		
2. Objecting party		
<input type="checkbox"/> Worker <input type="checkbox"/> Worker representative <input type="checkbox"/> Employer <input type="checkbox"/> Employer representative <input type="checkbox"/> Transfer-of-cost employer		
3. General information		
Is the worker/employer address and contact information the same as the decision letter? <input type="checkbox"/> Yes <input type="checkbox"/> No, see changes below.		
Name		
Address		City/Town Postal code
Telephone (day)	Telephone (evening)	Language <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Other
4. Representation		
See instruction sheet for information on possible assistance available.		
Please check one:		
<input type="checkbox"/> I will represent myself in the objection process, or I am currently seeking representation.		
<input type="checkbox"/> I have a representative to handle my objection.		
If you are represented – A signed <i>Direction of Authorization</i> for this representative must be in the claim file.		
Representative's name		Organization
Address		City/Town Postal code
Telephone (day)	Telephone (evening)	Fax
5. Intent to object		
I disagree with the following decision(s)		
Date of decision letter(s) (dd/mm/yyyy)	Issue(s) in dispute	
6. New information/reconsideration		
This is an opportunity to provide any new information that the front-line decision maker may not have considered, based on the contents of the decision letter(s). The decision maker can reconsider the decision(s) and may be able to change the decision(s). You will be advised of the outcome of the reconsideration.		
<input type="checkbox"/> No, I have no additional explanation/information to submit.		
<input type="checkbox"/> Yes, additional explanation/information is attached (please put the worker's name and claim number on each page).		
Name	Signature (print, sign and return to the WSIB or type and upload)	Date (dd/mm/yyyy)

Contact accessibility@wsib.on.ca if you require this communication in an alternative format.
200 Front Street West, Toronto, Ontario, M5V 3J1
wsib.ca/upload | Toll free: 1-800-387-0750 | TTY: 1-800-387-0050 | Fax: 1-888-313-7373
2397A (06/14) ITOW

Request for Updated Claim File:

Request for claim file: Jessica will then assist in completing the claim file request forms for those with **pre-existing claims** to ensure that we have the most up to date information in order to best assist with individual claims.

OHCOW can provide a copy of the claim file at the worker's request.

SAVE feature works only when using Acrobat Reader 8 or higher.
Use this button to clear the data field.   

wsib
cspaat
Workplace Safety & Insurance Board
Commission de la sécurité professionnelle et de l'assurance contre les accidents du travail
ON T A R I O

Mail To:
200 Front Street West
Toronto ON M5V 3J1

OR FaxTo:
416-344-4684
OR 1-888-313-7373

Worker Request for Copy of Claim File

Please complete a separate form for each claim requested. If you have previously received a copy of your claim file, you will receive updates to your file from the date of your last request. If you are considering objecting to a WSIB decision that denies benefits, please contact your decision-maker to discuss your concerns. Should you decide to proceed with an appeal, you will be automatically provided with a copy of your claim file.

Worker Information

Last Name First Name Claim File No.

Street No. Street Name Apt./Suite No. Town/City

Province Postal Code Country Telephone

Date of Birth (dd/mmm/yyyy) Date of Injury/Illness (dd/mmm/yyyy)

Please choose one option:

I am requesting that a copy of my claim file be sent to me at the above address.

OR

I am requesting that a copy of my claim file be sent to a third party listed below. (Please complete section below)

Personal information contained on this form is collected under the Workplace Safety and Insurance Act and will be used to respond to your request.

Signature of Worker Date (dd/mmm/yyyy)
Type your name and upload, or print and sign before returning to WSIB.

Third Party Information

Information required if requesting copy to be sent to a Third Party.

Name of Third Party




Name of Organization/Firm:

Street No. Street Name Apt./Suite No. Town/City

Province Postal Code Country Telephone

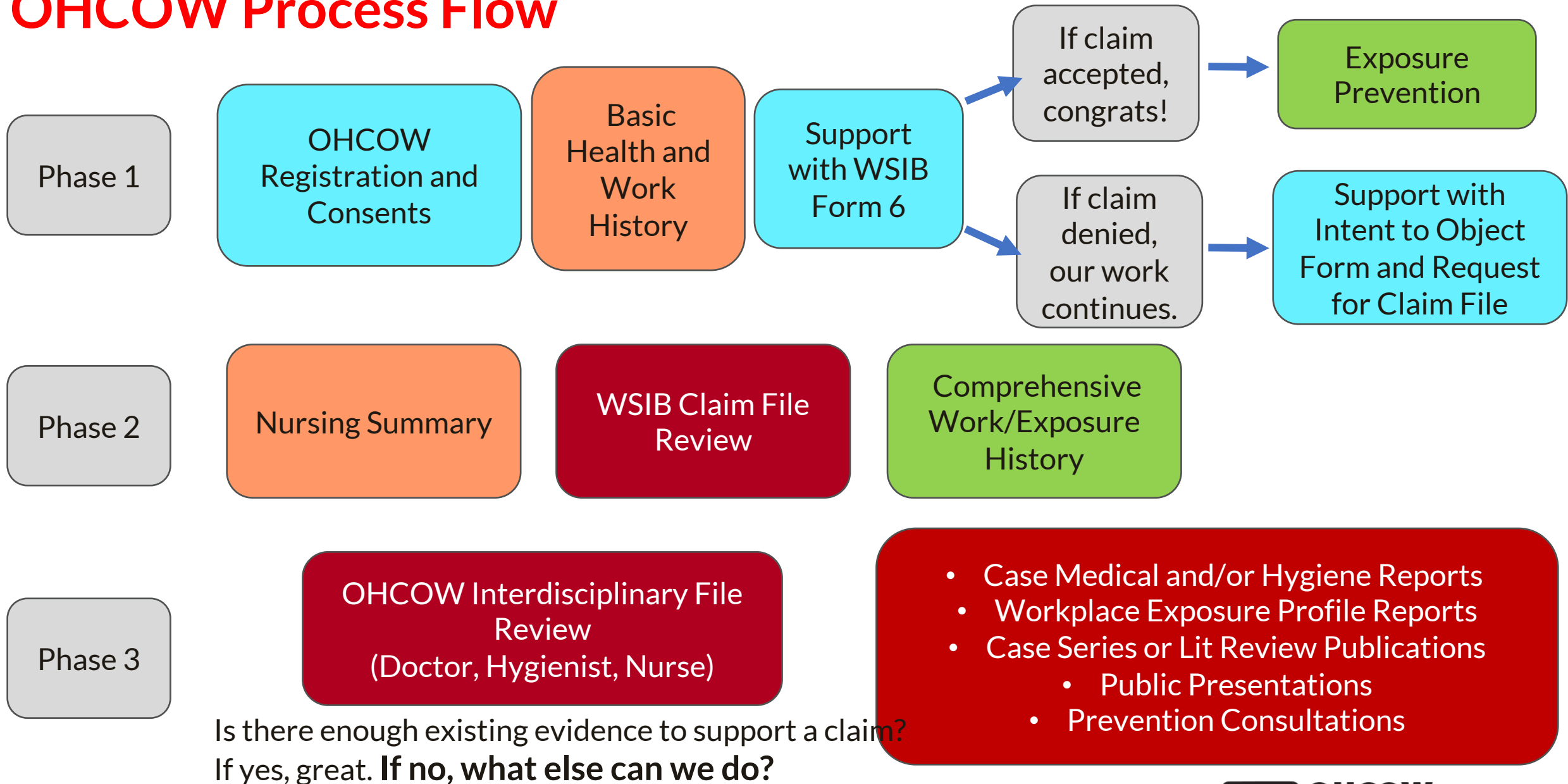
If you encounter any difficulties or have questions regarding this request for access, you may contact us at (416) 344-1000 or toll-free at 1-800-387-0750.

Visit our Web site www.wsib.on.ca for information on benefits, services, working safely and more.

SAVE feature works only when using Acrobat Reader 8 or higher.
Use this button to clear the data field.   

2144A (11/12) ACCESP

OHCOW Process Flow





BIG PICTURE

From the beginning - start gathering the information on an individual case by case basis

By doing this, it helps when we get down to groups, as we will then have everything we need.

- Health History
- Focused Health Questionnaires
- Work & Exposure History
- Medical Files
- WSIB Claims
- Other

Break: Stretch / Questions

Pebra/Ventra - Workers' Voices

Many different illnesses have been reported, including but not limited to:

- **Cancer**
 - Lung
 - **Salivary Gland**
 - Breast
 - Prostate
 - Among others (e.g., pancreatic, colon, GI)
- **Chronic Toxic Encephalopathy (CTE) - brain injury**
- **Reproductive Issues**
- **Cardiovascular disease**
- **Asthma**
- **Headaches**
- **Musculoskeletal Issues**



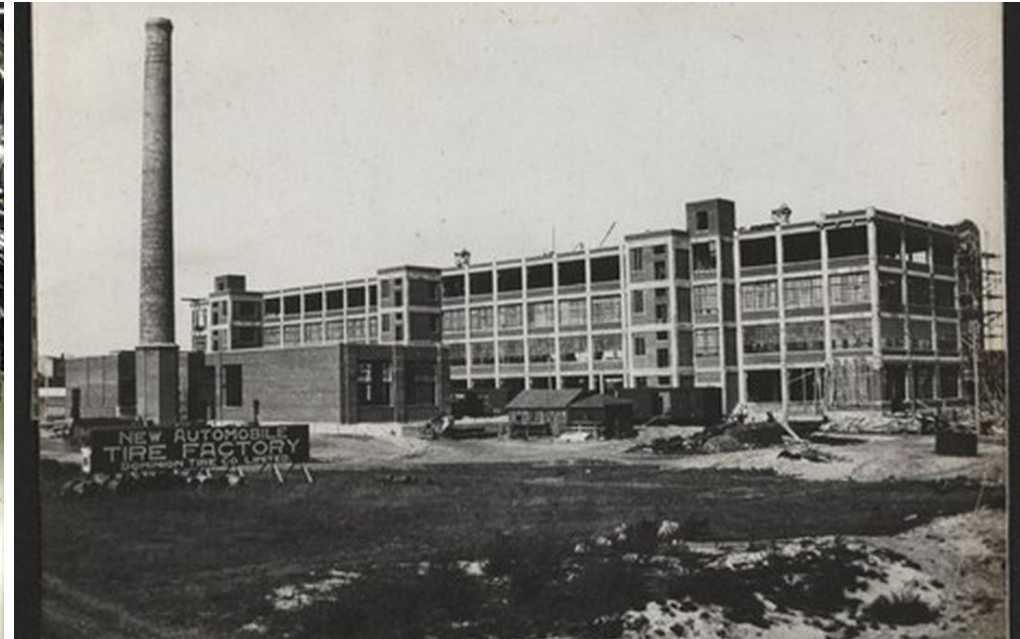
Pebra/Ventra Worker Obituaries

Case Series: Salivary gland cancer among Ontario plastics and rubber workers

Andrew Zarnke,
Director of
Projects



Car bumpers manufactured at Pebra/Ventra Plastics, Peterborough, Ontario.



Historic photo of Dominion Tire (Rubber) Factory in Kitchener, Ontario.

What is a case series?

- A description of 3 or more patients' experiences of a particular illness (i.e. 'cases' of illness)
- Presents detailed information about the illness as well as workplace exposures, especially if it is suspected that the illness is work-related.

Why are case series useful?

- They report important data about unique cases of illness and raise hypotheses about potential connections to workplace exposures.
- Useful for sharing knowledge about illnesses that are not yet considered an occupational disease by scientists and practicing physicians.



Salivary Gland Cancer – What is it?

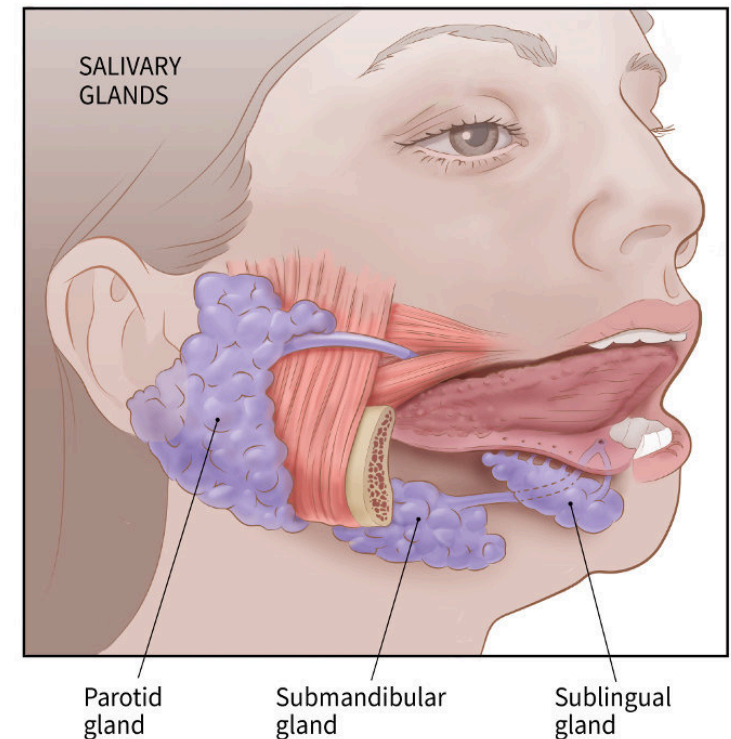
SGC is a rare cancer = Less than 6 cases per 100,000 population per year*

Malignant or cancer cells that form in the tissues of the salivary glands

Evidence is limited but some suspected occupational exposures include:

X- and Gamma- radiation
Radioiodines, including iodine-131
Nickel compounds/alloy


Rubber and plastics manufacturing



*Ontario Health (Cancer Care Ontario). Ontario Cancer Statistics 2020. Toronto: Ontario Health (Cancer Care Ontario); 2020.

SALIVARY CANCER INCIDENCE PER 100,000 PEOPLE

1.5 
Canada

23.5 
OHCOW

1,333 
VENTRA

Salivary Gland Cancer at OHCOW

N=8 cases of salivary gland cancer
captured at OHCOW clinics over time, all
from the below industries:

Worker Voice:

*Workers raise concerns
of suspected
occupation-related
illness and/or exposures*

1

Seeking Support:

*Workers seek support
for investigation of
occupation-disease-
exposure links*

Initial Evaluation:

- *How many cases?*
- *Hypothesized exposures?*
- *Immediate prevention needs?*

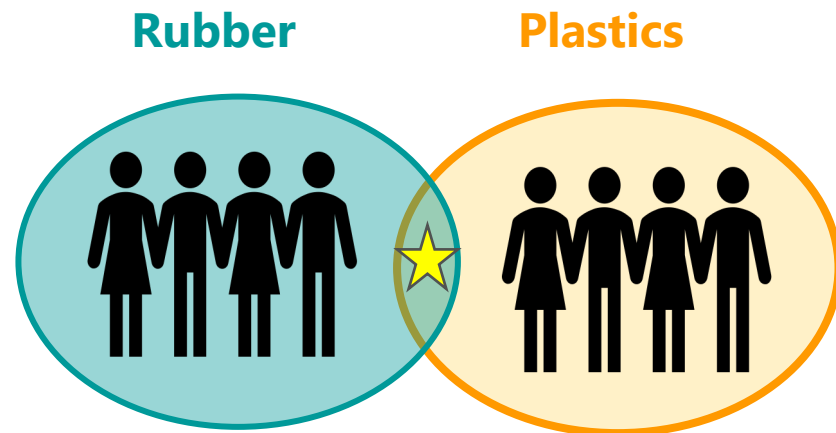
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Rubber Plastics

Questions we want to answer:

- Do we see elevated rates of this cancer among plastics and rubber workers compared to rates observed in the Ontario general population?
- Do these 8 workers have jobs and/or exposures in common?

Case Series: Salivary Gland Cancer



Step 1. Case Identification and Review

Step 2. Literature Review: Connections between occupational/environmental exposures and SGC cancer

→ Nitrosamines, solvents, ionizing radiation

Step 3. Illness/Exposure Matrix

→ **What is a matrix?** A grouping of cases by common diseases and exposures.

Step 4. Publication of results

Key purpose(s):

Informs exposure prevention

Inform WSIB policy and future WSIB claims

Hypothesis generation for future research

Illness/Exposure Matrix Example

Worker #	Involved Salivary Gland	Work History	Solvents	Nitro-samines	Isocyanate	Asbestos	Rubber Fumes
Plastics Worker 1	Right Parotid	17 years RIM	Yes	No	Yes	No	No
Plastics Worker 2	Left Parotid	11 years RIM, Paint	Yes	No	Yes	No	No
Plastics Worker 3	Left submandibular gland	13 years Paint	Yes	No	Yes	No	No
Rubber Worker 1	Left Parotid	35 years Mixing, Curing	Yes	Yes	No	Yes	Yes
Rubber Worker 2	Right Parotid	10 years Curing, Tire Building	Yes	Yes	No	No	Yes

Note: These data are fake and do not represent the health information for real workers.

Illness/Exposure Matrix

- ❖ Creating a matrix allows us to check for patterns and zero in on factors that are important (disease – summarizing defining characteristics)

Working with a multidisciplinary team to establish criteria in consideration, selection, and prioritization of cases and WSIB claims. When tabulating data according to the criteria identified, it allows us to determine which cases we can effectively support via medical/hygiene reports.

Share our work with external medical experts (while preserving confidentiality) so that they can provide insight on our approach and weigh in on whether our matrix shows any important trends.

Having data grouped together in such ways is of academic use & is the precursor to scientific research.

It generates new scientific evidence and knowledge that can be shared through publication in professional journals and/or reporting the results verbally at worker info sessions or professional conferences → suggesting directions for further study.

Case Series: Next-Steps

- First draft near completion
- Early evidence that SGC may be associated with plastics and rubber work. Common exposures are less clear, but solvent exposure seems to play a role in both groups.
- Case series draft will be shared with worker participants prior to publication.
- Publication expected Spring/Summer 2023.

Asbestos at Pebra/Ventra Plastics Plant

Outline

- Background to Pebra/Ventra
- Introduction to Asbestos
 - what is asbestos?
 - industries/occupations where exposure occurs
 - health effects
- Concerns about potential exposure to asbestos at Pebra/Ventra
 - Asbestos contamination of
 - wollastonite (Wollastocoat™)
 - 3M Flexible Putties ("Grey Putty")
 - Asbestos Containing Materials (ACMs)

Pebra/Ventra Plastics Plant Timeline

1986 - 1989

Pebra, Inc.

Expands from Kitchener plant to 2nd 200,000 sq ft facility in Peterborough

Main production processes; roller form, post lamination & injection/extrusion molding

1986-1992 – manual paint line

75 workers
(~60% women)

1988-1996

Pebra, Inc.

Reinforced Reaction Injection Molding (R-RIM) process 1988-2000 to produce larger molded parts; rocker panels & fascias

Increased automation & number of large molding machines (“clamps”) increased from 4 to 8

1993-1996 partially automated paint line

575 workers
(~50% women)

1996

Pebra, Inc. - Bankrupt

1996-98

JPE

1998-2001

Ventra

~ in 2000, large scale injection molding machines replaced R-RIM for production of larger parts in greater volumes

second off-site “warehouse” building added; used for storage, assembly, shipping

2001 - present

Flex-N-Gate/Ventra

2004 fully automated, robotic injection molding machines & fully automated, robotic paint line added

Current plant > 350,000 sq. ft

Asbestos at Pebra/Ventra Plastics Plant

Background

“We Can’t Breathe” Retrospective Exposure Profile of the Pebra Inc. Plastics Plant in Peterborough, Ontario (1986-1996) – submitted to OHCOW Jan 7, 2020

“the DeMatteo Report”

- Prepared by Bob & Dale DeMatteo, with UNIFOR Local 1987 Exposure Advisory Committee
- Purpose; to develop retrospective exposure profiles of the work processes at Pebra/Ventra Peterborough between 1986-1996
- Information sources & research process:
 - 1) Focus group sessions – Advisory Committee
 - 2) Risk mapping
 - 3) Documentation; MOL/MOE inspection & air sampling reports, consultant reports, JH&SC minutes, reports, logs & 2005 OHCOW retrospective exposure profile,
 - 4) Literature reviews

Asbestos at Pebra/Ventra Plastics Plant

Introduction to Asbestos

What is asbestos?

- A group of naturally occurring, fibrous silicate minerals
- Manufacturing and use of asbestos-containing products is severely restricted in most western countries, including Canada, and in some countries it is banned
- Historically been useful for many commercial applications because of its heat resistance, tensile strength, and insulating and friction characteristics
- Primarily found in roofing, thermal and electrical insulation, cement pipe and sheets, flooring, gaskets, friction materials, coatings, plastics, textiles, and other products
- International Agency for Research on Cancer (IARC) classifies asbestos as a known human carcinogen



Asbestos at Pebra/Ventra Plastics Plant

Introduction to Asbestos

Health effects of asbestos?

- mesothelioma (cancer of the linings of the lungs and other internal organs)
- cancer of the lungs, larynx and ovaries
- asbestosis (scar tissue in the lungs)

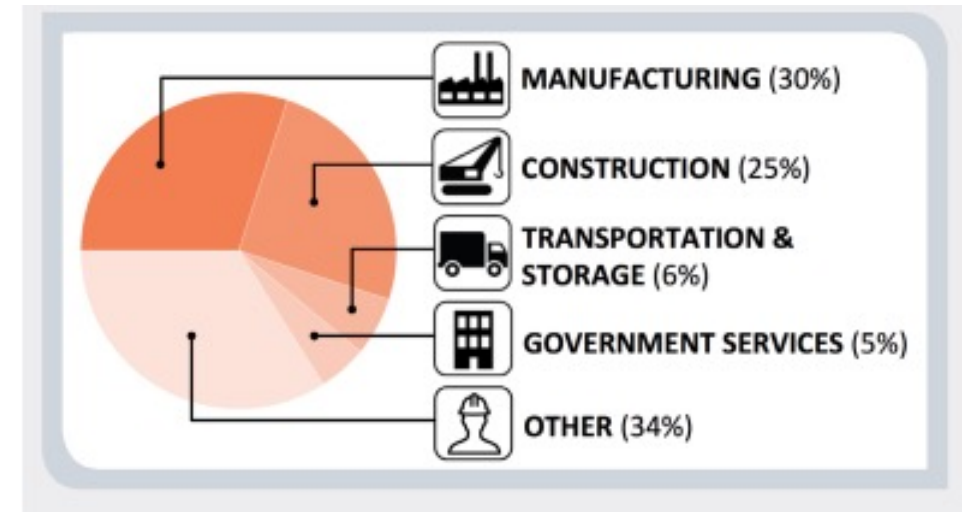
Source: [*Carex Canada: Asbestos - Burden of Occupational Cancer Factsheet*](#)

Asbestos at Pebra/Ventra Plastics Plant

Introduction to Asbestos

What workers are most affected?

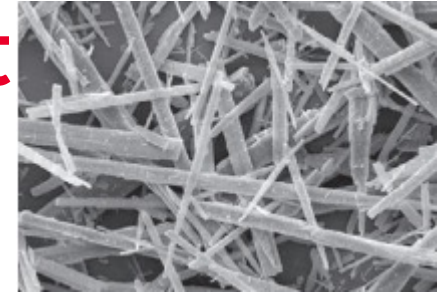
- most asbestos-related cancers occur among workers in the manufacturing & construction sectors
- these cancers also occur among workers in the transportation & storage sector and government services
- some of the other sectors affected include communication & other utilities, educational services, & wholesale trade



Source: [Carex Canada: Asbestos – Burden of Occupational Cancer Factsheet](#)

Asbestos at Pebra/Ventra Plastics Plant

Wollastonite



What is wollastonite?

- a naturally occurring needle shaped mineral that is a chemical combination of calcium, silicon & oxygen (calcium silicate) & is formed when limestone or other high-calcium rocks undergo high temperature & pressure changes
- mined (surface & underground), processed in a mill to remove impurities, change the size of the fibres or surface treated to improve adhesion between the wollastonite & polymers to which it is added

What is wollastonite used for?

- additive in plastics to make them stronger, more scratch resistant & lighter; wollastonite (Wollastocoat™) used at Pebra/Ventra as a filler added to polyol mix in the Reinforced Reaction Injection Molding (R-RIM) department 1988-2000
- additive in paints, ceramics, metallurgical applications (e.g., welding flux),
- as a substitute for asbestos or fiberglass because of similar shape & properties (e.g., fire resistance & strength) in floor tiles, friction products, cement, insulation boards, panels & roofing products

Asbestos at Pebra/Ventra Plastics Plant

Wollastonite (Wollastocoat™)

Potential Exposures at Pebra/Ventra

- during transportation in large totes (“Gaylords”) from the Tank Farm by forklift truck & during loading into the hopper at the polyol mixing station in R-RIM
- during sanding & grinding finished molded plastic parts

Main concerns about wollastonite

- Does wollastonite itself cause cancer or other health effects?
- Was the wollastonite (Wollastocoat™) used at Pebra/Ventra contaminated with asbestos?

Asbestos at Pebra/Ventra Plastics Plant

Wollastonite

Does wollastonite cause cancer or other health effects?

- Since wollastonite generally meets the definition of a respirable fibre, there was concern about possible adverse health effects on the respiratory system such as cancer & fibrosis (scarring of the lungs).
- In 1997 wollastonite was classified by IARC as a Group 3 carcinogen meaning that there was no evidence from human or animal studies to classify it as a causing cancer in humans.
- Based on currently available information (IARC & recent literature searches) wollastonite contained in the product Wollastocoat™ used as a filler at Pebra/Ventra, does not cause cancer.
- However, some early studies (1970's, 80's) found a higher rate of bronchitis & reduced lung function among production workers with long-term exposure to wollastonite.

Asbestos at Pebra/Ventra Plastics Plant

Wollastonite

- Was the wollastonite (Wollastocoat™) used at Pebra/Ventra contaminated with asbestos?
 - Based on a review of the currently available information; including IARC, other published studies & historical reports, it is unlikely that the wollastonite product used at Pebra/Ventra was contaminated with asbestos.
 - Exact details such as the timeline about when & where wollastonite was used at Ventra is still uncertain (i.e., unclear how much (if any) wollastonite was used before or after R-RIM operated between 1989-2000)

Asbestos at Pebra/Ventra Plastics Plant

Wollastonite

- Other concerns about wollastonite (Wollastocoat™)
 - surface treated with polyurethane (plastic) during the manufacturing process to improve adhesion between the wollastonite & the polymers to which it is added
 - review of the SDSs for Wollastocoat™ shows that it also contained:
 - polyurethane 5-10%
 - silica 1-5%
 - respiratory hazards of inhaling surface treated wollastonite dust?

Asbestos at Pebra/Ventra Plastics Plant

3M Flexible Putties

- Used primarily in the R-RIM process as a filler/repair paste
 - 3M Flexible Parts Putty (part # 5903) (“Grey Putty”) contained 20%-30% talc
 - 3M Fill E-Z Sand Part B (part # 5895) & E-Z Sand Flexible Parts Repair (part#5896) contained 15%-25% talc
- Potential exposure to the dust generated during sanding or buffing the finished parts in R-RIM & refinish areas
- Concern that the talc may have been contaminated with asbestos*

Asbestos at Pebra/Ventra Plastics Plant

3M Flexible Putties

- Some forms of talc have been found to be contaminated with asbestos, but this depends very much on where the talc was mined*.
- Air sampling by the Ontario Ministry of Labour or independent consultants between 1988 & 1994 found concentrations of airborne particles from sanding & buffing in different areas of the plant were below occupational exposure limits; however, no specific air sampling for asbestos was carried out.
- Some documentation suggests that the talc contained in the 3M putties used at Pebra/Ventra was not contaminated with asbestos but no independent corroboration to date.

Asbestos at Pebra/Ventra Plastics Plant

3M Flexible Putties

- Based on the limited information available, there is uncertainty as to whether the talc in the 3M Flexible Putty products contained asbestos.
- Because of this very limited information, it is not possible to estimate the intensity (if any) of the exposures to asbestos that may have occurred from this source.

Asbestos at Pebra/Ventra Plastics Plant

Asbestos Containing Materials (ACMs)

- Some ACMs have been identified at Ventra such as friable (easily crumbled) asbestos around some piping & a water meter & non-friable asbestos in the floor tiles.
- Aside from potential exposure to workers who may have been directly involved in asbestos removal activities, it is unlikely that production workers at Pebra/Ventra were exposed to asbestos fibres from ACMs during the course of their work.

Asbestos at Pebra/Ventra Plastics Plant

Summary

- There is insufficient information available to estimate the extent of the exposures to asbestos from two products that may have been contaminated with asbestos; Wollastocoat and Grey Putty or from ACMs present in the plant.
- The available reports and other documentation may not provide a complete history of occupational exposures as it is likely that not all historical MSDSs, MOL or independent exposure assessment or inspection reports are available.
- Based on the currently available information, it may be concluded that the likelihood of past & current exposure to asbestos at Pebra/Ventra is low.

Asbestos at Pebra/Ventra Plastics Plant

Limitations

The conclusions about potential asbestos exposure are based on limited information;

- The available reports and other documentation may not provide a complete history of occupational exposures.
- It is likely that not all historical MSDSs, MOL or independent exposure assessment or inspection reports are available (e.g., apparently after Pebra went bankrupt in 1996, many records & files were destroyed).
- Some of the information are from employer and/or manufacturers sources & could not be corroborated independently.



Thank you! What comes next?

- If you are already registered with OHCOW, you will be contacted for consent, health and work histories, OR other follow-up items.
- If you are not yet registered, you can contact us.
- Please keep us posted on changes to your health and work status (e.g. diagnoses, jobs/exposures, WSIB status)
- We will share the session recording with all attendees!

Email: peterborough@ohcow.on.ca

Phone: 705-749-3444 (Jessica Montgomery)

Thank you again for attending!

Survey: what did you think?

Any questions, ideas, concerns?

