# **WORKSAFEBC - RISK ANALYSIS UNIT PROJECT**

Slow acting harms	Involves risks where there can be many years between the initial exposure to a hazard and the materialization of an adverse outcome
Catastrophic risks	Risks that have the potential to result in an incident with 3 or more workers being hospitalized
Emerging risks	Risks with growing and potentially uncertain trends
Invisible risks	Risks that are not fully revealed through detection or reporting



#### **RAU Interactive Risk Register**

Chg. Log/ Criticality Impact Slow Project Risk Title Con. Lead SRA Select ID Catastrophic Emerging Invisible Hygiene F S -U Risk Adv. Profile Cmnt Acting Status F\*S<sup>2</sup> F\*S2\*U3/ Log Perceived Clear Portfolio-Acute Tra (Empty) 🔨 Cle 🗸 V Cle V Cle 🗸 ✓ Clear ✓ Clear ✓ Clear ✓ Y ✓ Clear ✓ Clear ✓ Cle Clear Clear ÅΜ Cle 🗸 Portfolio-Slow Acti AM/DM Risk Signal CH Count of Risks: 22 Clear Filters 💥 Portfolio-Slow 10075 Crystalline silica exposure Х Х Υ Υ Α 3 2.4 459 <u>X/1</u> GC/DG DD ~ Х Acting Portfolio-Slow 10179 Hazardous drug exposure Х γ Υ C 2 1.6 138 Х X X/0 KVP/GC AM Acting Exposure to asbestos during Portfolio-Slow Ρ 10047 demolition and construction Х Υ Y 2 2.7 14.3 2 114 Х X/1 GC/DG DD Acting activities Radiation exposure from dental Portfolio-Slow 10160 cone beam computed Х Х γ Υ С 2 2.1 8.8 2 71 X X <u>X/3</u> DG DD Acting tomography (CBCT) Portfolio-Slow Х Х γ Υ 65 <u>X X/2</u> 10194 Flour dust exposure A 2 2.0 8.1 2 X GC DD Acting Portfolio-Slow Welding fume exposure Х Х γ Υ А 2 1.5 2 36 <u>X/0</u> GC 10029 Х X AM Acting Electromagnetic frequency Portfolio-Slow 10228 exposure from communication Х х Υ Y 1.5 1.5 3.4 2 27 X <u>X/0</u> DG AM Acting antennas on buildings Tick-borne infectious disease Portfolio-10190 х х х Y Y 1.5 1.3 2.5 2 20 х X X/2 GC AM 

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Last Updated: August 14, 2018

#### **OHS REGULATION PART 7 DIVISION 3**

This Division applies to all sources of ultrasonic energy, non-ionizing and ionizing radiation, including radiation sources governed by the *Nuclear Safety and Control Act* (Canada), except as otherwise <u>determined</u> by the Board.

# **GENERAL REQUIREMENTS**

Until it is determined with confidence whether a worker's annual exposure exceeds or could exceed 1 mSv, an employer must ensure that the worker is provided with and properly uses a personal dosimeter acceptable to WorkSafeBC. Refer also to section 7.22 of the Regulation and **OHS Guideline G7.22 Monitoring exposure. When monitoring** has been conducted for at least one year and the incurred doses are properly documented, the employer can use the dose results to determine whether a worker's annual exposure is likely to exceed 1 mSv.

# **EXPOSURE LIMITS AND ALARA**

Applicable Body Organ or Tissue	Maximum Annual Dose (mSv)
Whole body – non-pregnant worker (effective dose)	20
Whole body – pregnant worker (effective dose)	4
Lens of eye (equivalent dose)	150 (under review)
Skin (equivalent dose)	500
Hands and feet (equivalent dose)	500

# HIGH EXPOSURE NOTIFICATION (HEN) DOSE INFORMATION CHANGE

	National Dose Registry Dose Information Change Request Form (Protected when completed )
	A Section A - Dose Information Change Request
62 100	Once completed, please send this form to your Federal, Provincial, or Territorial Regulator (see attached list)
	Al Responsible User Declaration (All fields required, please check or fill in all information.)
	1) Dosimetry service name: Group or Account Number:
	2) Company name as it appears on the dose report
	3) Name of the individual to whom the dosimeter was assigned and his/her SIN number
	4) Serial number of the dosimeter, as appropriate, as listed on the original dose report
	5) The period of time the dosimeter was worn, as listed on the original dose report
	Whole Body Dosimetry         6)         1s the Investigation Report attached requesting a change to the whole body dose (effective dose)?         Yes         No
	<ul> <li>a) Change the whole body dose frommSv tomSv</li> </ul>
	7) Is the Investigation Report attached requesting a change to the skin dose (equivalent dose)? Yes No
	a) Change the skin dose frommSv tomSv
	Extremity Dosimetry 8) Is the Investigation Report attached requesting a change to the extremity dose (equivalent dose)? Yes \No \
	a) Change the extremity dose frommSv tomSv
	Responsible User
	$\Box$ Dr $\Box$ Mr. $\Box$ Mrs. $\Box$ Ms.
	Given Name: Initial: Sumame :
	Signature : Date : Phone number:
	E-mail address: Fax number:

(Protected when completed.)

### **REPRODUCTIVE HAZARDS**

Workers are <u>fully informed</u> of any potential reproductive hazards associated with exposure to ionizing radiation.

When requested by a pregnant worker or by a <u>worker intending</u> to conceive a child, the employer <u>must make counselling</u> <u>available</u> with respect to the reproductive hazards associated with exposure to ionizing radiation.

#### **STANDARDS FOR USE OF EQUIPMENT**

Equipment producing ionizing or non-ionizing radiation or ultrasonic energy must be installed, operated and maintained in accordance with Safety Code 34

# EXPOSURE CONTROL PLAN

- Site specific ECP
- Master ECP with safe work procedures applied for site activities
- Education and training

## **RADIATION SURVEYS**

The employer must conduct a radiation survey for ionizing radiation in accordance with the standard practice specified under the applicable Safety Code listed in section 7.23 (a)

(a) at the times required by the Safety Code or regulations, as the case requires,

(b) if equipment has been damaged or modified, or

(c) <u>if there is an indication of an unusually high exposure of</u> <u>a worker to ionizing radiation.</u>

#### RECORDS

The employer must

(a) maintain and make available to the Board,
(i) for at least 10 years, records of radiation surveys,
(ii) for the period that the worker is employed plus 10 years, records of exposure monitoring and personal dosimetry data, and

(b) make the records available to workers