



GOOD NEWS:

# INJURED WORKER KEEPS ON TRUCKING

**I**t was a seemingly minor injury – a splinter - but a week after it happened, Brad Smith thought he might be dying.

On April 30, 2012, a steel splinter lodged into Smith's finger as he was working on a dump truck. Smith is a mechanic with the Department of Transportation and Infrastructure in Saint John.

"I didn't think anything of it, but a week later, on May 7, I was on my way to the hospital with what was considered a 'mini stroke,'" he said. "I had felt very sick, and thought I might have the flu."



Brad Smith

If only it had been the flu. What Smith did have was a staph infection, which travelled through his bloodstream into his heart. On May 9, just a little more than a week after getting the splinter, Smith underwent open-heart surgery to have a stainless-steel valve and permanent pacemaker installed.

The infection from the initial splinter injury resulted in a total of 27 complications, he said, and required multiple daily antibiotic injections.

"When you go through something like that, it puts things into perspective. You learn that life is too short to worry about the little things."

What he did worry about, however, was work, and providing for his family – his wife, Karen, and his two children, aged 9 and 5. "I was scared. I didn't know what I was going to do. I had worked at this job for 20 years," he said. "And sitting home wasn't for me."

Smith began rehabilitation shortly after he was discharged from the hospital in June – both cardiac rehabilitation, through the Saint John General Hospital's cardiac unit, and employment rehabilitation under supervision of an occupational therapist.

"I was concerned that he may not be able to return to his job as a truck mechanic knowing that the physical demands required involved a lot of heavy lifting," said Cindy Phinney, Smith's case manager at WorkSafeNB. "But the employer was supportive and very accommodating in order to assist in his return to the workforce. Brad progressed very well through the Gradual Return to Work Program to the point that he returned to work full-time (on light duty) on October 15, with only limited restrictions, despite the significance of his complications from the injury," Phinney said.

"Before my injury I often had to lift or move things weighing 200-300 pounds," Smith said. "But when I returned to work, I couldn't lift anything more than 50 pounds. (Smith had previously worked on large vehicles such as graders and backhoes, but returned to light duty, working on half-ton trucks. When he returned to work on October 15, he worked five days a week from 8 a.m. – 4:30 p.m., but his workload increased gradually, every four weeks.)

When I visited Brad in the hospital, I never thought he'd ever be back to work," said Donald Beers, shop supervisor. "He's the type of person not easy to replace – sincere, honest, a good worker with a great personality," Beers said. "He's a really good mechanic, and they're really hard to find."

In addition, Smith had training as Beers' back-up supervisor. "Even though as an employer there is the duty to accommodate, for us it wasn't a duty at all. We were going to do everything that needed to be done to get him back to work. I think it's always in the best interest of an employer to do so."

Though not all stories of injured workers have a happy ending, this one shows that with a positive attitude, motivation and employer support, it's possible for a worker to overcome complications to get back to a happy and productive life.

"I am so happy to be back to work," Smith said, adding that he now better appreciates the time spent with his family and the things he's always enjoyed, like camping, bowling and fishing. •

Save the date!

**WorkSafeNB's 33rd Annual Health & Safety Conference**

November 6-8, 2013  
Fredericton Convention Centre,  
Fredericton, N.B.

## BOARD MEMBER PROFILE



Michèle Caron

A passionate advocate for human rights, with a background in education, labour and law, Michèle Caron is a perfect fit for WorkSafeNB's board of directors.

Caron was appointed to the board in June 2010 as a worker representative, nominated by the Federation of New Brunswick Faculty Association. "I accepted the nomination because I felt, with my experience, I had something to contribute. I also knew I had something to learn," Caron said.

And her experience is impressive. Caron's career began as a teacher

in New Brunswick's public school system in 1971, where she worked with special needs children. In 1973, she moved to Ottawa, continuing her education career, but now teaching French to public service employees. She returned to New Brunswick in 1976 to various roles in human resources management with three different federal government departments, where she gained experience in staffing, employee relations, labour relations, official languages and job classification.

In 1982 Caron became Atlantic Regional Representative for the Canada Employment and Immigration Union's (CEIU) branch of the Public Service Alliance of Canada.

"As a union representative, I was exposed to a lot of law. I was there when the *Canada Labour Code* was changed. It was something I was always drawn to and had wanted to pursue. But in 1971, when I completed my bachelor's in political science, law wasn't taught in French in New Brunswick. And I wasn't prepared to leave the province at the time, nor study it in English," she said.

But in 1986, it was being taught in French at l'Université de Moncton, so she resigned her union job, and at the age of 40, began pursuing a law degree, which was followed by a master's in law from Dalhousie. From there, she went back to l'Université de Moncton, where she taught fiduciary and labour law and served in various positions on the faculty union, including as president for the three years before her retirement in 2010.

Her experience with health and safety was primarily with CEIU. When the new *Canada Labour Code* was adopted, union members had to be trained to work effectively on joint health and safety committees. Caron was responsible for their training program.

Although her resume is extensive, Caron said when she joined the board she lacked experience on the compensation side. "It was a steep learning curve at first. At the university, we didn't deal with many compensation claims, but I've learned a lot in my time as a board member," she said.

"As a board member, the challenge is always the same – that is to find the right balance between

employer interests and those of workers. My contribution as a jurist is to ensure we remain respectful of the foundation of the Meredith Principles – the compromise in which workers gave up the right to sue an employer in exchange for no fault compensation."

"But giving up this right to sue, however, does not mean that workers have abandoned their right to justice. Justice for the worker is tantamount, and we must ensure that the worker does not have to bear the costs of lack of prevention and negligence. They should not have to suffer financially, and should not be under-compensated."

"It's important to remember that even if a worker is negligent, the employer has control of that worker and the work environment," she said.

"It is a delicate balance to maintain; that is why there is supposed to be an equal representation on the board of workers and employers. And our decisions must be based on evidence, not ideology."

She said WorkSafeNB should be proud of the province's low accident frequency. And as she continues to sit on the board, Caron said she is committed "to ensuring more stakeholder consultation, and to that effect, more transparency."

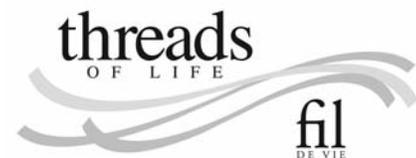
Caron, who lives in Cocagne with her spouse of 22 years, Noella, said adjusting to retirement has been easy. She said the couple loves to travel, with China as their most recent destination. •

# SUPPORT FOR FAMILIES AFFECTED BY WORKPLACE TRAGEDY

Threads of Life® is a national organization that supports families who have experienced a tragedy in the form of a life-altering workplace injury, occupational disease or fatality.

Established in 2003, this registered charity provides family members with one-on-one peer

support and guidance, as well as annual forums for families to come together and share their experiences with each other. It also calls for the elimination of all workplace injuries by leading a culture change in which we all come to view workplace injuries, illnesses and deaths as morally, socially and economically unacceptable.



Association for Workplace Tragedy Family Support  
Association de soutien aux familles des victimes de tragédie au travail

This year's Atlantic Canadian forum takes place from May 31-June 2 at the Atlantica Hotel & Marina Oak Island in Western Shore, Nova Scotia. For more information, please call 1 888 567-9490. •

# DAY OF MOURNING REMEMBERS WORKERS KILLED AND INJURED ON THE JOB

In 2012, more than 10,000 New Brunswick workers were hurt on the job, seven of them fatally (one from an occupational disease). Another three succumbed to previous years' injuries or disease.

So far in 2013, one worker has been killed on the job.

"On Sunday, April 28, join us in remembering our fellow New Brunswickers who have suffered injury or death while simply trying to earn a living," said Gerard Adams, president and CEO of WorkSafeNB. "The effect of these deaths is devastating not only for the surviving family members, but also their friends, co-workers, employers and the community."

The Day of Mourning was first observed in Canada in 1984. April 28 was chosen as the day of remembrance because it was the day the third reading took place for the first comprehensive Workers' Compensation Act (Ontario 1914) in Canada. Today, the Day of Mourning is observed in more than 100 countries worldwide.

Once again, the New Brunswick Federation of Labour and WorkSafeNB are teaming up to recognize the April 28 event by providing posters to workplaces. Additional posters are available through WorkSafeNB's regional offices and through local district labour councils.

"Let's honour those workers injured and killed, and show our support to their families, friends and co-workers," Adams said.

Because April 28 falls on a Sunday, WorkSafeNB suggests that on Friday, April 26 you wear a black ribbon or pin (available in many workplaces) or take part in a flag lowering ceremony at your workplace. You are also encouraged to attend one of the Day of Mourning ceremonies being held at various locations around the province. Check WorkSafeNB's website for more details at [www.worksafenb.ca](http://www.worksafenb.ca).

Please take a moment to read this touching tribute submitted by Ann and Paul Grant, in memory of their son, Tony:

For a list of Day of Mourning ceremonies, contact the New Brunswick Federation of Labour office at 506 857-2125.

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## GONE BUT NEVER FORGOTTEN (SUBMITTED)

Tony Grant of Bath, New Brunswick was killed at the age of 48 as a result of a workplace accident on December 21, 2010. This not only came as a shock to his family and friends, but also brought immense sadness.

Tony was a wonderful man who always had a smile on his face. He was a father, husband, brother, uncle and a great friend to many people. He was a skilled carpenter and cabinetmaker and an avid outdoor sportsman. In season, he could often be found enjoying the great outdoors at the Bath salmon pool or fishing for trout in various streams. Every July he would catch that perfect salmon for his mother on her birthday.



Whether it was fiddleheads, fish or game, Tony was very generous in sharing the fruits of his labour. He was always willing to lend a helping hand to whoever came his way. You always knew Tony had visited your place by the empty Budweiser can he left behind.

Tony's favourite holiday was Christmas – he especially enjoyed the family get-together on Christmas Eve. But the year that Tony passed it wasn't all smiles and laughs like usual, as this was the day of his funeral and our final goodbyes. After the long day at the funeral home we went back to the camp and shared stories of the things Tony did during his short life, even all the shenanigans he'd gotten himself into as a child and a young adult.

Tony was a proud father and enthusiastically supported his children at many of their basketball and soccer games.

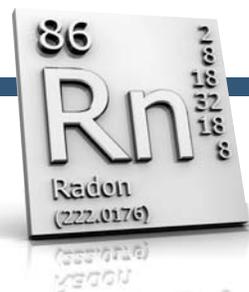
When we lose the people we care about, we find ourselves swept up in a torrent of emotions and the feelings that surface are familiar. But when you lose someone you love deeply like a son, father or husband, the grief can be mentally blinding.

Tony will always be remembered as a loving husband, father, son and brother. Tony, you will always be missed by your friends and family.

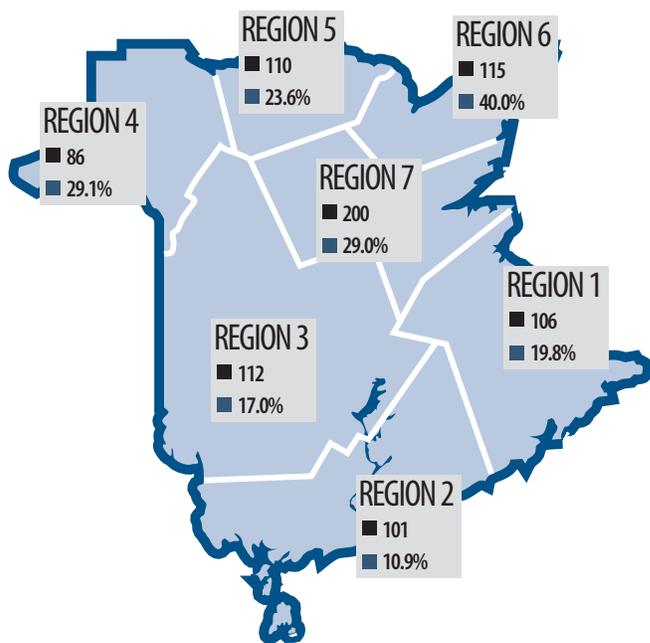
Always loved and never forgotten,  
Mom, Dad & Family

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# RADON IN THE WORKPLACE



A recent Health Canada study has found that almost 25% of homes that were tested in New Brunswick were above the recommended levels for radon. While the study did not evaluate the levels of radon in New Brunswick workplaces, it is expected that radon exposure could be an issue in some workplaces. The map of New Brunswick below provides an overview of Health Canada's tests result for our province.



## LEGEND

■ Number of participants    ■ % above 200 Bq/m<sup>3</sup>

While some areas of the province were found to have a higher percentage of homes with levels above the current guideline, all regions had homes with high levels. Therefore, this map should not be used as a guide to deciding which areas of the province require testing and which do not. All areas of the province should be considered at risk for elevated levels of radon. The only way to know if your workplace has high levels is to test.

Health Canada has prepared information on radon to guide home owners and workplaces in determining whether radon is a concern, including proposed corrective measures to limit exposures. The following is a question/answer summary of the information prepared by Health Canada. Other questions and answers can be found on the Health Canada or the New Brunswick Department of Health website.

## Q. WHAT IS RADON?

A. Radon is a radioactive gas that is formed naturally by the breakdown of uranium in soil, rock and water. As a gas, radon is slowly released from the ground, water, and some building materials that contain very small amounts of uranium, such as concrete, bricks, tiles and drywall. Radon gas breaks down further to form additional radioactive particles called radon daughters, or “progeny”, that can be breathed into the lungs.

Radon is colourless, odourless and tasteless and cannot be detected by the senses. It can be detected with special instruments. When radon is released from the ground outside it mixes with fresh air and gets diluted, resulting in concentrations too low to be of concern. However, when radon enters an enclosed space it can accumulate to high concentrations and become a health risk.

Radon concentrations fluctuate seasonally, but are usually higher in winter than in summer.

## Q. HOW CAN RADON AFFECT MY HEALTH?

A. Radon gas and radon progeny in the air can be breathed into the lungs where they breakdown further and emit “alpha particles”. Alpha particles release small bursts of energy which are absorbed by nearby lung tissue. This results in lung cell death or damage. When lung cells are damaged, they have the potential to result in cancer when they reproduce.

The only known health risk associated with exposure to high levels of radon in indoor air is an increased lifetime risk of developing lung cancer. Radon is the second leading cause of lung cancer after smoking. The risk from radon exposure is long-term and depends on the level of radon, how long a person is exposed and their smoking habits. If you are a smoker and are exposed to elevated levels of radon your risk of developing lung cancer increases significantly.

Other than lung cancer, there is no evidence that radon exposure causes other harmful health effects such as any other form of cancer, respiratory diseases such as asthma, or symptoms such as persistent coughing or headaches.

## Q. WHAT IS THE CANADIAN GUIDELINE FOR RADON IN INDOOR AIR?

A. Following a risk assessment and a public consultation, the revised guideline was approved

by the Federal Provincial Territorial Radiation Protection Committee in October 2006. The new guideline of 200 Bq/m<sup>3</sup> makes Canada's guidelines lower than or equal to most every other major industrialized country.

“Remedial measures should be undertaken in a dwelling whenever the average annual radon concentration exceeds 200 becquerels per cubic metre (200 Bq/m<sup>3</sup>) in the normal occupancy area. The higher the radon concentration, the sooner remedial measures should be undertaken. When remedial action is taken, the radon levels should be reduced to a value as low as practicable. The construction of new dwellings should employ techniques that will minimize radon entry and will facilitate post-construction radon removal, should this subsequently prove necessary.”

NOTE: The Province of New Brunswick currently does not regulate radon exposures in workplaces except for radon found in an underground mine. As with the practice of the Province of New Brunswick for workplaces operated by the province (schools, health care facilities, etc.), WorkSafeNB recommends the guidelines proposed by Health Canada be followed in workplaces where non-radiation workers conduct work.

## Q. HOW DO I TEST FOR RADON?

A. Health Canada recommends dwellings be tested for a minimum of three months, ideally between September and April when windows and doors are typically kept closed.

Long-term radon detectors commonly used are:

- Alpha track detection
- Electret ion chamber

There are two options for testing for radon: one is to purchase a do-it-yourself radon test kit and the other is to hire a radon measurement professional. If you choose to perform the test yourself, radon detectors can be purchased over the phone, from the Internet or from some home improvement retailers. The radon test kits will include instructions on how to set up the test and send it back to a lab for analysis once the testing period is over. In some cases the lab analysis fees and postage are additional.

NOTE: There is no legal requirement for employers to test for radon except in an underground mine. However, the only way for an employer to know if they are compliant with the guideline is to test.

*Continued on page 5*

# 2012 ANNUAL REPORT SHOWCASES STABILITY



WorkSafeNB has released its *2012 Annual Report* to the New Brunswick legislature, with highlights including a reduction in workplace injuries, a 96.5% return to work rate, falling assessment rates and full funding status – factors that all contribute to a stable workers' compensation system.

"Fewer workplace injuries is good news for New Brunswick workers and their families," said Sharon Tucker, chair of WorkSafeNB's board of directors. "I'm proud that New Brunswick is one of the safest places to work in Canada. Since 2001, injury rates are down by more than 30%. These stats are evidence that our prevention strategies are working and that attitudes are changing. And while measures like increased workplace health and safety inspections play a role, I believe our partnerships with stakeholders and our provincial counterparts

are key in promoting culture change across the region."

As a result of lower than budgeted claims and administration costs, and higher investment returns than expected, WorkSafeNB recorded an operating surplus of \$101 million, resulting in a funded position of 126.7%. The strong funding position has allowed for a decrease in the provisional average assessment, from \$1.70 in 2012 to \$1.44 for 2013. This rate continues to remain the lowest east of Manitoba, said WorkSafeNB president and CEO, Gerard Adams.

"It is good news for employers, certainly, but also from the labour movement's point of view – that money allows those employers to expand their operations, to hire more people, to pay more to their existing staff. All those flexibilities exist because they're paying less in assessments. But

most importantly, the numbers mean that more New Brunswickers are returning home safely from work to their loved ones every day.

"I congratulate New Brunswick's workers and employers who helped us achieve these results by reducing injuries and lost-time claims and claim durations. And I thank WorkSafeNB's board of directors, management and staff for their continued commitment and hard work toward our vision of healthy and safe workplaces in New Brunswick."

Looking ahead, WorkSafeNB will continue to collaborate with its Atlantic Canadian counterparts to create efficiencies with respect to communications campaigns and other areas of business.

The *2012 Annual Report* is available online at [www.worksafenb.ca](http://www.worksafenb.ca). •

## RADON: *Continued from page 4*

If you choose to hire a service provider to perform the radon test, Health Canada suggests you ask the service provider the questions outlined below.

Questions to consider asking the service provider	Health Canada recommendations
What type of radon test device do you provide (short-term or long-term)?	Long-term (min. three months)
Are you certified or trained to provide radon measurement services?	Certified under the Canadian National Radon Proficiency Program (C-NRPP)
Are you familiar with Health Canada's measurement protocols*?	Yes

\* A guide is available for assessing radon in residential public buildings, such as hospitals, schools and long-term care facilities. This guide

can be used for measuring radon in other types of workplaces. Additional information on sampling procedures can be obtained by contacting the New Brunswick Department of Health.

### Q. WHERE IN THE BUILDING SHOULD I PERFORM THE TEST?

A. To provide a realistic estimate of the radon exposure of the occupants, all measurements should be made in the normal occupancy area of the lowest lived-in level of the building. The normal occupancy area is defined as any area occupied by an individual for more than four hours per day.

### Q. HOW CAN I REDUCE THE AMOUNT OF RADON IN MY BUILDING?

A. If your home or building tests above the guideline you should hire a certified radon professional to determine the best and most cost effective way to reduce the radon level in

your home. The most common radon reduction method is called sub-slab depressurization. With this solution, a pipe is installed through the basement sub-flooring to an outside wall or up through to the roof line with a small fan attached that draws the radon from below the house to the outside before it can enter your home. This type of system can reduce the radon level in a home by over 90%. Increasing ventilation and sealing major entry routes can also help reduce radon levels, but their effectiveness will be limited depending on how high the radon level is and the unique characteristics of each building.

Contact the Canadian National Radon Proficiency Program (C-NRPP) at 1 800 269-4174 or visit the website at <http://nrpp.info/> for a list of certified service providers who can help reduce the level of radon in your home or building. •

# IN THE COURTS



**AV NACKAWIC INC.** pleaded guilty November 26, 2012 to a charge under subsection 100(1) of *General Regulation 91-191* of the *OHS Act* for failing to ensure that adequate precautions were taken to ensure employee safety and leaving an area unguarded when a guardrail was removed to conduct work.

The charge was laid following an accident on December 9, 2010, in which a worker fell more than 10 feet to the floor and sustained an L2 lumbar fracture and sacrum fracture.

The company was fined \$5,000, plus a \$1,000 victim surcharge.

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## WORKSAFE NB PROMOTES NAOSH WEEK 2013



### ARE YOU AS SAFE AS YOU THINK?

It's a question WorkSafeNB encourages you to ask yourself and the theme for the 2013 North American Occupational Safety and Health (NAOSH) Week, taking place May 5-11.

NAOSH Week focuses on the importance of increasing understanding, raising awareness and preventing injuries and illness in the workplace, at home and in the community.

NAOSH Week was conceived when labour representatives from Canada, Mexico and the United States met during the North American Free Trade Agreement (NAFTA) talks in the mid-90s. The Canadian Society of Safety Engineering (CSSE) was asked to expand its Canadian Occupational Health and Safety Week into a North American

initiative and the logistics for NAOSH Week were laid out between 1997 and 2000.

Its success has always been rooted in its community-based approach. Across the continent, NAOSH Week events and activities are co-ordinated by local or regional committees, comprised primarily of volunteers who share a focus and vision of safer workplaces and communities.

In New Brunswick, Bruce Harquail is such a volunteer. Since the early 90s, even before the framework for NAOSH was laid out, the WorkSafeNB health and safety officer has actively helped co-ordinate activities for joint health and safety committee members around the province and has witnessed much growth in that time.

"When we started these activities in 1990, we were simply giving attendees updates on health and safety legislation – now we promote different avenues related to the theme of the year."

This year's theme encourages workers and employers to be proactive when it comes to their health and safety, and not just in the workplace.

"Our speakers this year will discuss various topics in personal safety, work safety and sport safety where we try to make our participant think of safety not only at work but in all type of activities."

"There are benefits to thinking outside the box of the workplace – the fruit gained by everyone is a healthy workforce that puts in practice the theme "Are you as safe as you THINK?" •

FOR MORE ON NAOSH WEEK, VISIT: [www.naosh.org/](http://www.naosh.org/)