



Dear Brothers & Sisters

On Saturday April 23, 2005 our union is hosting a first of its kind **Occupational Health Clinic** for IBEW members at the union hall. This Clinic is geared to workers of all ages, from apprentices to retirees. I want to personally invite you to attend so we can make this initiative a success.



Your occupational health is vitally important to me as your Business Manager, the Executive Board and the Trustees of our Health and Welfare Plan. We know your health directly impacts your quality of life, family and future as a tradesmen.

Without your health you cannot work, participate in family or recreational activities or enjoy your retirement. Most working families have enough income to last two months in the event of a crisis. After that, many families are in financial peril. I'm proud that LU 353 has a Health & Welfare Plan that assists our members during time times of health crisis. It's a plan that protects members from falling into financial ruin at the most vulnerable time of your life.

Quite often we find that members with persistent health complaints are unable to continue working, usually well before their planned retirement age. There are tremendous costs when your health fails even though the union provides disability benefits and assists members in receiving benefits from the Workplace Safety and Insurance Board. Unfortunately these membership benefits do not address the root cause why many members experience health problems in the first place.

Over the past seven years we have acquired a great deal of experience in the area of occupational health and continue to catalogue occupational injuries and diseases that impact your health. There are many injuries that are compatible with the repetitive and physically demanding work of electrical workers (knees, shoulders, elbows, wrists, back and neck).

However, in the area of occupational disease, we have far too many members who are beginning to experience health problems i.e., cancer, deafness, breathing, chronic joint pain, persistent arm and hand numbness, fatigue of the upper extremities, spinal problems, and internal organ failure.

IBEW LU 353 is now poised to take the issue of your Occupational Health to the next level. On Saturday April 23, 2005, we are converting the union hall into a Occupational Health Clinic staffed by Dr. Roland Wong and Dr. Noel Kerin, along with union volunteers and other health professionals from the Occupational Health Clinics for Ontario Workers (OHCOW).

The IBEW/OHCOW partnership has spanned over 10 years, and through our WSIB Consultant Gary Majesky, LU 353 refers more workers for assessment than any other local union in Ontario. The feedback from our members who have attended OHCOW is quite favourable.

To make this Clinic a success, I would personally like to invite every member who has had a work injury, a past WSIB claim, or experiencing a stubborn and persistent health complaint to attend. This Clinic is for you. Your participation will help us in identifying possible work related problems that you are experiencing, and this information will feed into future and ongoing medical research to advance our understanding of occupational health issues affecting electrical workers.

The effort and resources to coordinate this Clinic is quite extraordinary and we require a good turnout. This leaflet describes what will be happen at the Clinic. Together, in brotherhood, LU 353 is advancing the health and safety agenda for our current and next generation of members. I look forward to seeing you on Saturday April 23, 2005.

Joe Fashion
Business Manager/Financial Secretary



LU 353 Occupational Health Clinic Saturday April 23, 2005



What Is The Occupational Health Intake Clinic

OHCOW is committed to assisting organizations identify workplace hazards and exposures. One method to capture information is to sponsor an Occupational Health Intake Clinic.

An intake clinic is held where a group of workers sharing the same employer, workplace or workplace exposures have reason to believe they have similar and related health concerns. This includes every type of injury or illness, including ergonomic issues such as repetitive strain injuries. The purpose of an intake clinic is to capture information about the workplace, the working conditions, the exposures and the work and health histories of the workers.



Dr. Noel Kerin
(OHCOW)

As a result of an intake clinic, **OHCOW** is able to identify hazardous workplace risks and make recommendations for change. Possible injury and disease clusters such as cancer are identified. Trends in disease clusters such as cancer are also identified. Trends in diseases related to a particular

industry or process are revealed. **OHCOW** then uses the information to recommend change to prevent future injury or exposure.

From this information, one of the key roles of the **OHCOW** team is to make the work-relatedness assessment on an individual or group basis. A general assessment of the workplace, working conditions and exposures is used to make recommendations to the union to develop a prevention plan. This information also assists the union in representing members in establishing WSIB claims.

The role of the **OHCOW** team is to guide the process; to develop an appropriate health history and exposure questionnaire, to educate the client group on risk and hazard mapping, and work with the union to develop the protocols.

To ensure that **OHCOW** maintains appropriate controls to comply with legislative requirements for confidentiality, personal health information and medical records, a Letter of Understanding is signed by each worker regarding custodianship of the workers' personal health or medical information to legally protect all the parties.

**LEADERSHIP LEADING THE WAY
FOR THE NEXT GENERATION**

Intake Clinic Process

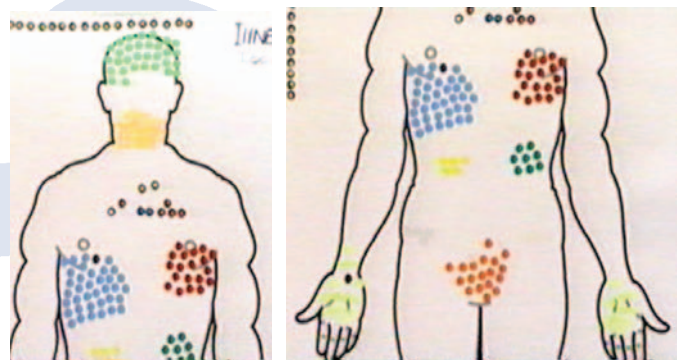


Occupational Health
Clinics for Ontario
Workers Inc.

- Registration
- Intake interviews
- Body Mapping
- Risk and Hazard Mapping
- Physician Examination
- Exiting
- Special Considerations



BODY MAPPING



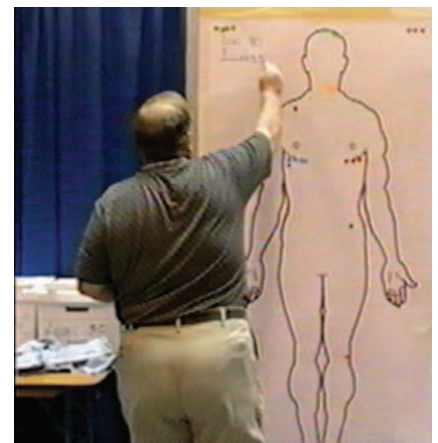
REGISTRATION

This is the first point for workers. Each worker coming to the clinic are received and registered. Registration ensures that there is a record of that individual's attendance. Preliminary information such as name, address and phone # are collected. The intake file is given to the worker or to the volunteer in charge of interview scheduling.



A simple but very effective way to see illness or injury trends in worker groups is to use body mapping. This is a "snapshot" picture of the current state of affairs within a select group. Body mapping can be used to chart illnesses and injuries. Using life-sized body posters, information from the health history questionnaire is mapped out.

Because body mapping is such a visual tool, it is an effective method to demonstrate possible clusters or trends.



INTAKE INTERVIEWS

Trained volunteers will sit with the worker in a private space to conduct the interview. This helps them to respond to questions. It allows the interviewers to probe for more details.



HAZARD MAPPING

Risk or hazard mapping is somewhat more involved than body mapping. This is a way to chart workplace risks or hazards such as where chemicals were stored or where ventilation systems were inadequate.

Many occupational diseases result from long term exposures to substances, some of which are no longer in use. By using the hazard mapping, it is possible to identify what substances existed during what time period and where in the facility it was stored and used. This information helps in determining causal links between current health concerns or diseases and the workplace exposures.

Physical Examination

In some cases it may be necessary to have the occupational health physician present at the intake session. The doctor is there to make examinations where it is warranted. They also act as a resource for questions about occupational illness or disease.

Consents

During an intake clinic personal and/or medical information is being collected. How that information will be used and by whom must be clearly stated and the individual must give permission. The collection, use, storage, disclosure and disposal of personal medical information is governed by the *Health Information Protection Act*. This is covered under another OHCOW policy.

It may occur that the personal / medical information may need to be shared with other third parties. This is unlikely at the intake clinic stage, but if the situation were to occur, consent to and from OHCOW to that third party will be obtained.

What Workers Can Bring (medical records)

If you have medical records in your possession or a WSIB claim file, please bring these records along. However, it is not necessary to bring medical records to the intake clinic. If you don't have any, still attend.



Leaders Who SUPPORT Local 353 Intake Clinic

We have made great strides in health and safety in the construction sector over the years. Especially on the safety side. Where we have to move now is to start and look at the health issues. There are more people dying of disease and critical deaths. This Intake Clinic will bring to the forefront of peoples minds, from government and workers, the issue of occupational health and disease.



John Smith
LU 353 Exec-Board Member
Bus Rep Toronto Building Trades Council

We know that these clinics in every single community where we held them, have led and provided the spark to raise the issue of occupational health in that community. If you go to Sarnia today and talk to anybody on the street, they know about occupational disease, and they know somebody that has an occupational disease from the industries in that community.



Wayne Samuelson
President Ontario Federation of Labour



It's just amazing how many people are still exposed to asbestos. When you look at the stats last year, the WSIB recognized 37 mesothelioma claims, which is taught in the medical schools to be a rare disease. It is absolutely not a rare disease.

Dr. Noel Kerin
Occupational Health Physician (OHCOW)

You, your family and loved ones shouldn't have to suffer the burden of a fatal illness. Exposure to hazardous materials is no different than an employer allowing you to use a faulty ladder where you fall down and brake your neck or get killed. When dealing with an occupational disease, because of the latency period, this allows us to have a laissez faire attitude to the exposure of hazardous materials and associated illness.

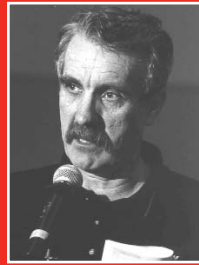
The LU 353 Occupational Health Clinic is an important initiative and one I whole heartedly support. Joe Fashion and the leadership of your union have risen to the challenge by holding this clinic and are to be congratulated. As a IBEW member I'm deeply concerned about occupational health and how we as construction workers are affected. You have my commitment that I will act upon the findings generated and will support ongoing research through my role as a WSIB Board of Director and Business Manager of the Provincial Bldg Trades Council.



Patrick Dillon
Bus Mgr Provincial Bldg Trades Council
Board of Directors, WSIB

Brotherhood - **Working Together To Improve Your Health**

A couple things we hope to accomplish. One to document the individual exposures and create a visual image of exposure and worker illness. Next, to use it for worker awareness and force government to promote better health protection in the building trades compared to the industrial sector where they have exposure limits which don't exist for building trades.



Barry Stevens
E-Board member
LU 353 Clinic Coordinator

Body maps are terrific. A picture is worth a 1,000 words. I saw the body maps for electricians and clusters for electricians. It's an

illustrative way of what's going on with a group of workers. It shows the hazards that construction workers face. You can see that there are a number of people that have respiratory illness. Including cancer. We also have a number of asbestos related diseases in the upper respiratory tract.



Jay Peterson
Business Manager
Toronto Building Trades Council



There was an opinion abroad in the scientific and medical community that the asbestos epidemic had passed and the train had left the station. That asbestos is a historical problem and we don't

have it anymore. The June 2004 intake clinic for construction workers told us in no uncertain terms that not only has the train not left the station, but we don't know the size of the train that is coming into the station.

Dr. Noel Kerin
Occupational Health Physician (OHCOW)

I can't stress how important this clinic is. If you catch diseases earlier, we can save lives. By coming to this clinic, you are helping your children and grand children. By exposing this, we're forcing government to act, so that our children don't become sick or die like our brothers today because of work exposures 40 years ago. We want to make the electrical trade a better place to work because of our experience.

Howard McFadden
Chair LU 353 Health & Safety Committee



As your WSIB representative for the past 7 years, I know first hand the problems the members experience. Having assisted over 3,000 members in that time, I urge you to attend. Whether your work

injury has resolved or you have a permanent impairment award, you should show up and be counted. There are many health issues that are work related and we must work intelligently to advance scientific and medical research into health and safety. Whether you have attended OHCOW in the past, please attend.

Gary Majesky
WSIB Consultant LU 353



Saturday, April 23, 2005 IBEW 353 Union Hall 9 am-4 pm