

Date of Meeting (y/m/d) 2023 06 15

PART I - EMPLOYER

WorkplaceNL Firm Number 940001

Site Number 31

EMPLOYER (head office information)	EMPLOYER REPRESENTATIVES
Company name: <u>MEMORIAL UNIVERSITY OF NFLD & LABRADOR</u>	Co-chair: SARAH LEWIS Certification Training #: <u>SAR8636315</u>
Mailing address: <u>PO BOX 4200 (FACULTY OF ENGINEERING)</u>	Co-chair Status: <input checked="" type="checkbox"/> Assigned <input type="checkbox"/> Acting
ST. JOHNS NL A1C 5S7	Members: Certification Training #
CITY PROVINCE POSTAL CODE	DENNIS PETERS <u>DEN6670168</u>
Employer site number/location: _____	
Total number of employees on site: <u>148</u>	
Telephone number: <u>709 864 8812</u> Fax number: <u>709 864 4042</u>	WORKER REPRESENTATIVES
Date of next meeting: <u>2023 08 08</u>	Co-chair: KEN SNELGROVE Certification Training #: <u>KEN6385503</u>
YEAR MONTH DAY	Co-chair Status: <input checked="" type="checkbox"/> Assigned <input type="checkbox"/> Acting
Seasonal shut down start date: _____	Members: Certification Training #
YEAR MONTH DAY	SALIM AHMED <u>SAL7342011</u>
Seasonal shut down end date: _____	GLENN RICE <u>GLE8892504</u>
YEAR MONTH DAY	SHAWN ORGAN <u>SHA7732548</u>
	RUSHI PATEL <u>RUS8973382</u>
	DOUG SMITH _____
	NITA ROGERS <u>NIT6760854</u>
	Guests: <u>Marius Normore</u>

PART II - OH&S ACTIVITY

Since last meeting indicate the following:	From this meeting indicate the following
No. of workplace inspections conducted: <u>1</u>	No. of safety hazards identified: <u>0</u>
No. of workplace complaints/concerns received: <u>0</u>	No. of health hazards identified: <u>0</u>
No. of incident reports reviewed: <u>0</u>	No. of outstanding items from last meeting: <u>0</u>
No. of right to refuse work situations: <u>0</u>	

PART III - SUMMARY OF MEETING

ITEMS FOR FOLLOW-UP SHOULD BE CARRIED FORWARD AT EACH MEETING UNTIL SUCH TIME AS THE ITEMS ARE COMPLETE

ITEM DATE	ITEM(S)	RECOMMENDATION(S)	ACTION	DATE FORWARDED TO EMPLOYER	RECOMMENDATIONS IMPLEMENTED Y/N (date)	RESOLVED	
						Yes	No
1. Mar, 20/23	OIL DRUM-TWO CORRODED AND SUFACE IS CORRODED. NO CAPS ON THEM. RAIN IS GETTING IN.	DRUMS INSPECTED AND NO OIL WAS PRESENT. REQUESTING DRUMS BE REMOVED.	SARAH LEWIS/CRAIG MITCHELL	Mar, 20/23	Mar, 30/23		✓
2. Mar, 05/20	CONCRETE LAB: FAILURE OF RESEARCHERS TO MAINTAIN SAFE WORKING SPACE WHILE WORKING OR TO RETURN SPACE TO SAFE, CLEAN CONDITIONS.	VESTIBULE COMPLETED. EXHAUST FAN REMOVED FROM ROOF. ELECTRICAL SHOP ENGAGED TO RUN WIRING FOR INDOOR AIR QUALITY MONITORS. IF DUST IS MOVING IN THE SPACE PAST A SET POINT, FRESH AIR WILL BE BROUGHT INTO THE ROOM. A MOBILE PIECE OF EQUIPMENT EXTRACTION SOLUTION WILL BE USED.	SARAH LEWIS	Mar, 05/20	Sep, 23/22		✓
3. Mar, 06/23	COMPLAINTS OF ODORS FROM OCCUPANTS OF SUNCOR CENTRE WHEN THE WIND IS BLOWING IN A CERTAIN DIRECTION.	NO UPDATE TO REPORT. CONSULTING WORK IS DONE. NEEDS TO BE ASSIGNED TO A PROJECT MANAGER. SUGGESTED TO INSTALL A CLOSE INTAKE WHEN THE UNIT IS ON. MAYBE A SENSOR FOR WIND DIRECTION WHICH GENERATES A LIGHT WHEN NOT IN USE. MAYBE TRYING A SCRUBBER.	SARAH LEWIS & CRAIG MITCHELL	Mar, 06/23	Mar, 30/23		✓
4. Jun, 09/23	STRENGTH LAB INSPECTION	DETAILED AND IN-DEPTH INSPECTION COMPLETED. MOST ISSUES RESOLVED BUT OTHERS REMAIN ON-GOING. WILL NEED TO MEET WITH USERS TO COMPLETE RUSK REGISTRIES TO DEVELOP AND IMPLEMENT LAB SAFETY PROTOCOLS FOR STUDENTS.	SARAH LEWIS	Jun, 15/23	Jun, 15/23		✓