

Date of Meeting (y/m/d) 2023 11 23

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:
CITY PROVINCE POSTAL CODE	Certification Training #
Employer site number/location: _____	NITA ROGERS <u>NIT6760854</u>
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>2024 02 15</u>	Co-chair: DOUG SMITH Certification Training #: <u>Dou8634367</u>
YEAR MONTH DAY	Co-chair Status: <input checked="" type="checkbox"/> Assigned <input type="checkbox"/> Acting
Seasonal shut down start date: _____	Members:
YEAR MONTH DAY	Certification Training #
Seasonal shut down end date: _____	CRAIG MITCHELL <u>CRA7297659</u>
YEAR MONTH DAY	GLENN RICE <u>GLE8892504</u>
	SHAWN BESON _____
	SHAWN ORGAN <u>SHA7732548</u>
	ALLISON KENNY <u>ALI8637407</u>
	RUSHI PATEL <u>RUS8973382</u>
	Guests: <u>Wanda Wilcox</u>
	<u>Darrell Gosse</u>

PART II - OH&S ACTIVITY

Since last meeting indicate the following:	From this meeting indicate the following
No. of workplace inspections conducted: <u>4</u>	No. of safety hazards identified: <u>4</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>1</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. Nov, 23/23	SMELL OF BURNING RUBBER COMING FROM VENTILATION SYSTEM	INVESTIGATED SOURCE OF SMALL AND FOUND IT WAS A BELT FROM THE FAN SYSTEM. BELT REPLACED. NO MORE SMELL		Nov, 23/23		✓	
2. Nov, 23/23	REPORTS OF A STRONG PROPANE SMELL IN EN1036G. THIS SITE HAS BEEN VISITED MULTIPLE TIMES TO TRY AND IDENTIFY THE SOURCE OF THE SMELL, HOWEVER THERE HAS NOT BEEN ANY ODORS WHEN VISITED.	SHOULD ANOTHER REPORT COME IN, HAVE SOMEONE VISIT THE ROOM ASAP TO TRY AND IDENTIFY WHERE SMELL IS COMING FROM.		Nov, 23/23		✓	
3. Nov, 23/23	FIRE ALARM REPOSTED TO BE VERY LOW VOLUME IN EN1015 AND EN1036G. EAR PROTECTION IS OFTEN WORN IN THESE LABS.	RECOMMENDED THAT LAB SUPERVISOR PUT IN A REQUEST THROUGH FACILITIES MANAGEMENT TO HAVE STROBE LIGHTS INSTALLED		Nov, 23/23			✓
4. 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		✓
5. Nov, 23/23	STRUCTURES LAB REQUIRES ADDITIONAL WELDING SCREENS	ADD MORE WELDING SCREENS.		Nov, 23/23			✓
6. 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 RISK REGISTRIES TO DEVELOP AND IMPLEMENT LAB SAFETY PROTOCOLS FOR STUDENTS.	SARAH LEWIS	Jun, 15/23	Jun, 15/23	✓	
7. 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	✓	