WorkplaceNL

EMAIL FORM TO: OHS.Minutes@workplacenl.ca FAX FORM TO: 709.778.1564 CALL US AT: 709.778.1552 1.800.563.9000 visit us at: workplacenl.ca

Occupational Health & Safety Minutes Report Form

Date of Meeting (Y/M/D) 2021 / 12 / 02	2 WorkplaceNL Firm Number 9400	1 Site Number 3_	1		
PART I – Employer Employer (head office information)	Employer Representative(s)	Certification Training #	Present (Y/N)		
Company name: Memorial University of Newfoundland	Oti Barb Elliott	BAR6574987	Υ Υ		
240 Prince Phillip Drive	Co-chair:				
Mailing address:	assigned: acting:				
St. John's NL A1B 3X5	Members: Dennis Peters	DEN6670168			
CITY PROVINCE POSTAL CODE	Dennis Cramm	DEN6348962	Υ		
Worksite street address:	Lisa Cook	LIS8348155	N		
Total number of employees on site: 150					
Date of next meeting (Y/M/D): 2022 / 02 / 11	Worker Representative(s)	Certification Training #	Present		
Seasonal shut down start date (Y/M/D):		Certification framing #	(Y/N)		
Seasonal shut down end date	Co-chair: Ken Snelgrove	KEN6385503			
(Y/M/D): / /	assigned: ✓ acting:				
Lica Cook	Members: Craig Mitchell	CRA7297659	Υ		
OH&S minutes contact name: Lisa Cook Telephone: 709-864-7467	Mark Kieley	MAR7695386	Y		
Email: lisa.cook@mun.ca	Salim Ahmed	SAL7342011	Y		
	Xianta Jiang	XIA7216858	N		
Failure to complete this form in its entirety may delay minutes from being accepted and processed. Please ensure three copies are made; one to post in the workplace, one for the OH&S committee's files, and one to send to WorkplaceNL.	Guest(s) One additional worker: Lori Hogan #Lor7997931 - not present Guest: Darrell Gosse				
Part II – OH&S Activity					
Since last meeting indicate the following: From this meeting indicate the following:					
No. of workplace inspections conducted No. of safety hazards identified		rified	0		
No. of workplace complaints/concerns received	No. of health hazards identified 1				
No. of incident reports reviewed	No. of outstanding items from last meeting 2				
No. of right to refuse work situations	0				
Summary of Meeting on reverse o or Attached Document					
Both employer and worker co-chairs MUST SIGN AND DATE the minutes when they agree that the minutes are complete and accurate.					
Employer Co-chair Signature: Worker Co-chair Signature:					
Date: December 3, 2021 Date: December 3, 2021					

PART III - Summary of Meeting

Item Date	ummary of Meeting Item	Recommendation	Action By
			(who & when)
Mar. 5, 2020	Concrete lab: Failure of researchers/students	A letter has been submitted to the Dean expressing the concerns of the committee. Co-Chairs to send reminder to dean asking for update on recommendations previously forwarded.	Who: K\$ & BE
	to maintain safe working spaces while working	Strieschmonauone providucity forwarded.	
	or to return space to safe, clean conditions when finished for the day.		
	when minorized for the day.		
Feb. 18, 202(Incident in SJ Carew Building - many informal	Building OHS committee on the Feb. 18 situation response and	
	complaints and one written correspondence	follow up. The presentation was postponed from Meeting #3 2021 to Meeting #4 2021. The presentation postponed to Meeting #1 of 2022.	
	regarding conflicting messages from and		
	between RNC, CEP, MUN, FEAS during the		
	threat on Feb. 18. MUNSafe app notification		
	was not received by all and was sent an hour		
	into police presence. No follow up from OCRO.		
Dec 2, 2021	Concrete lab: Equipment failure - Silica Sand	Supervisor has been informed to complete Accident/Incident report.	14th
200 2, 202		EHS to follow up.	Who: Bipul
	escaped from sandblasting machine.		Hawlader
		:	