

Joint Occupational Health & Safety Committee Meeting Minutes

Name of Committee:	Faculty of Medicine	Worker Co-Chair: Employer Co-Chair:	Patryk Krolikowski Sunny Pao
Date:	December 19, 2023	Time: Location:	10:00 AM Zoom

AGENDA: Location: Zoom: https://ubc.zoom.us/j/66837840702

Standing Items

	Topic	Time (min)	Desired Outcome(s)	Document
1	Roll Call and Introductions	5	Land Acknowledgement Guests and new members introduced	
2	Determination of Quorum	1	 Minimum of 4 members Worker reps ≥ employer reps 	
3	Approval of Previous JOHSC Meeting Minutes	1	Agreement that minutes are a complete and accurate reflection of the previous meeting	See Previous Minutes
4	Review of Agenda	1	 Everyone has an opportunity to add additional agenda items Agreement on agenda 	See Meeting Agenda
5	Review Actionable Items from LST Minutes	2	 A list of concerns that require JOHSC input is recorded An action plan is created for each item (next steps and possible resolutions) 	
6	Review Workplace Safety Inspections	5	Members are aware of workplace inspections and follow up on items requiring review	
7	Review Central Accident/Incident Reporting System (CAIRS) Reports	10	 Everyone has an opportunity to ask questions Everyone understands the details, recommendations and resolutions for each incident All incidents have a worker rep assigned Thanks to our worker rep volunteer for incidents last month, call for new worker rep 	7a) December NEW CAIRS reports7b) See Previous Minutes
8	Ongoing Business – Status of Action Items	10	 Updates are discussed and recorded All member questions are addressed Everyone is up to date on all items 	See Open Business Action Log



9	JOHSC Recommendation Letters (Correspondence)/ WorkSafeBC Reports	0	 Reach consensus on any recommendation letters to send Agree on where to send letters and who/how this will be done Committee receipts WorkSafeBC Inspection Reports from SRS 	See WSBC attachments in SRS Co-Chair email, WSBC IR from C- W Campus
10	Review Education and Training	5	 All member training is recorded Members are aware of available training opportunities 	 See items for December JOHSC Meeting, CWA Events Results of Education Poll
11	Safety and Risk Services Update	10	Review monthly recommended items to discuss Any action items are discussed and assigned	See SRS Co-Chair email

New Business

12	Microtome guidance	5	Published document now ready for use/ distribution	See attached document
	Document			
13	2024 Meeting	5	Confirm committee still OK with 3rd Tuesday of the month at 10:00am	
	Schedule		Improvements for meeting structure	
14	2024 Inspection	5	Discuss Administrative Inspection Survey for 2024	
	Initiative			

Next Meeting: January 16, 2024



1. ROLL CALL					
Worker Representatives	Association/Union	Work Location	Present	Regrets	Absent
Patryk Krolikowski (Co-chair)	AAPS	DHCC	Ø		
Mickey Frenklach	AAPS	UBC Campus	Ø		
Jennifer Xenakis	Non-Union Tech	Koerner Pavilion	☑		
Beth Whalen	Non-Union Tech	St. Paul's Hospital, Heart Lung Institute		V	
Clare Beasley	Faculty Association	BCCHRI			
Ivan Leversage	AAPS	St. Paul's Hospital, Heart Lung Institute			Ŋ
Tara Chen	CUPE 2950	IRC	\square		
Jharmela Tejano (A)	CUPE 2950	IRC			
Employer Repre	esentatives	Work Location	Present	Regrets	Absent
Sunny Pao (Co-chair)		DMCBH	☑		
Melanie Bertrand		DMCBH			
Michelle Neilly		IRC		☑	
Resources/	Guests	Work Location	Present	Regrets	Absent
Nick Steel		SRS (FoM)	\square		
Pierre Tanguay		SRS (FoM)	☑		
Mardi Henderson		SRS (FoM)	☑		
Madeline Leighton		SRS (FoM)	☑		
Maggie Hou		VFMP Class of 2024 Representative			lacksquare
Navid Saleh		VFMP Class of 2024 Representative			☑
Christa Grona		NMP Class of 2024 Representative			V
Lucy Wang		VFMP Class of 2025 Representative			V
Kabeer Ponia	Ponia VFMP Class of 2025				V
Ella Chan		VFMP Class of 2025 Representative			V
Crystal McLeod		NMP Class of 2026 Representative			V
Dela Shojaei		VFMP Class of 2026 Representative			Ø
Kai Leong		VFMP Class of 2026 Representative			V
Aaron Bogutz		Life Sciences Centre	\square		

^{* (}A) – Alternate member



2.	DETERMINATION OF QUORUM						
	a. A minimum of 4 members;						
	b. Worker representatives (faculty and staff workers who do not exercise managerial functio	ns) and employer repres	entatives				
	(management workers who exercise managerial functions);						
	c. At least half of the members must be worker representatives.						
ls t	here quorum for this meeting?	Voc	No				
* If	* If quorum is not met, the meeting does not qualify as a monthly meeting. The monthly meeting will need						
to l	pe rescheduled within the same month.						

3. APPROVAL OF PREVIOUS JOHSC MEETING MINUTES						
(Statement to indicate minutes of pr	evious meeting have	been read & acknowledged	and to record any corrections	to it)		
• Move to adopt minutes Moved by: Sunny Pao Seconded by: Jennifer			Jennifer Xena	ıkis		
Are the minutes approved?				Yes	No	
Are the minutes approved?				$\overline{\square}$		

4. REVIEW OF AGENDA

• No additional items.

5. REVIEW ACTIONABLE ITEMS FROM LST MINUTES (if applicable)

Place actionable items under Accident/Incident Investigation, Safety Inspections, Correspondence, New Business etc. as applicable and assign proper item # for further discussion/action.

☑ No actionable items noted.

Minutes were received from the following LSTs:

- CGSHE LST
- BCCRI JOHSC
- HLI LST
- Pathology & Laboratory Medicine LST
- C&W JOHSC
- VCHRI LST
- BSSC LST
- DHCC & MSAC LST



6. REVIEW OF W safety of workers		E SAFETY INSPECTIONS (including any changes to equipment, machinery of	or work processes the	at may affect the h	ealth or
Distribute inspectio	n checklist	(s) and report(s) for meeting and use this table to record discussion ar	nd new recommend	dation(s)	
☐ No Inspecti	ons Sched	uled: no reports to review			
✓ Inspections	complete	with no JOHSC follow up required: naming conventions listed below			
☐ Inspections	were dela	yed. Plan for rescheduling / follow up listed below			
☐ Inspections	require JC	PHSC action: listed below			
☐ Reports we	re added t	o SharePoint			
Item #	Driority	Action Plan	Assigned	Follow up:	Status
(Use Inspection #)	Priority	(Actions Taken/Need to be taken)	То	Date Pending	Status
		 LSC 5th Floor- Nov 2023 			
CL 22/12/10	(Use Inspection #) Priority	 LSC Main and B-Level Inspection- Nov 2023 	N1 / A	NI / A	
GI-23/12/19		 LSC 2nd & 3rd Floor Inspection- Nov 2023 	IN/A	N/A N/A	
BSCC Annual Inspection- Level 5 West					

7. a) REVIEW OF NEW CAIRS INCIDENT / ACCIDENT REPORTS (as per attached meeting package)

See attached incident report:

• Monthly Incident List & Statistical Summary Report (For any <u>general</u> CAIRS information that requires discussion or action, please record under "New Business" e.g. make note of trends etc. Any incident-specific items and follow up requests are to be listed below)

(* See Legend at end for Priority and Status Codes)

<u>NOTE</u>: The Committee has agreed that, at each meeting, a Worker Rep from this committee volunteer to be the identified as the Worker Rep for incidents that are being reviewed <u>that do not have a Worker Rep already identified</u>. This is practicable and appropriate because Worker Reps on this committee <u>are already actively participating in the review of these incidents</u>.

Jennifer Xenakis volunteered to be the Worker Rep for the incidents reviewed at this meeting. Legends defining common types of incidents/accidents within FoM:

- Needle Stick

Environmental Hazards (EH)

^{*} GI – General Inspection



7. a) REVIEW OF NEW CAIRS INCIDENT / ACCIDENT REPORTS (as per attached meeting package)

- Sharp cut

- Exposure to Potentially Infectious Materials (EPIM)

- Ergonomics

- Contact with Chemicals (CWC)

- Spills or Gas Leaks

Slip/Fall

- Others i.e. not covered by categories noted above

Note that A/I involving animals are traditionally reviewed by the Animal Workers JOHSC

Item # (Use CAIRS Incident ID # and Incident Date)	Priority	Action Plan (Actions Taken/Need to be taken)	Assigned To	Follow up: Date Pending	Status
132561 (132456) 2023-11-21	С	REFER TO VGH JOHSC Noted that involved person was cleaning chemical safety cabinet as part of a lab decommissioning and noted a strong odor. There was an excess of chemicals, as well as incompatible types stored together. Reminder to the committee the importance of regular checking and testing, and to immediately stop work to perform a risk assessment if odor is noted.	N/A	N/A	N/A
132557 (132546) 2023-12-06	С	Contact with Chemicals: Student dispensing stacking gel into apparatus spilled gel onto pants. No injury occurred. Root Cause: Student was not wearing lab coat Corrective Actions: Preceptor reiterated importance of wearing appropriate PPE and lab coats are a requirement in a lab environment All corrective actions complete	Mardi	N/A	С
132516 (132513) 2023-11-30	С	REFER TO AW JOHSC	N/A	N/A	N/A
132512 (132288) 2023-10-27	С	Sharp Contact: Confirming supervisors report was submitted. Report was covered last month, please refer to previous meeting minutes. No further action required	Mardi	N/A	С
132511 (132559) 2023-11-29	С	Other: Folding table fell onto IP foot, breaking two toes. Table folds in half to be moved upright, however design means in the upright position they are likely to tip. The building has a difficult layout so to assist with the First Aid response a staff member was waiting for responder in the corridor to direct them. Root Cause: Design of tables makes them awkward to move and prone to tipping when in upright position.	Pierre	N/A	С



7. a) REVIEW OF	NEW CA	RS INCIDENT / ACCIDENT REPORTS (as per attached meeting package)			
		Corrective Actions: A group meeting was held and decided to no longer move table in folded position, instead only to be moved in horizontally and unfolded by two people to avoid tipping. All corrective actions complete			
132508 (132489) 2023-11-29	С	EPIM: Student closing an incision during a procedure, felt something in their eye which may or may not have been a blood splatter. Student was wearing a face shield. CAIRS report was submitted by student as a precaution. Reminder it is best practice to submit a CAIRS report as a precautionary measure even if not 100% sure. Preceptor followed up with student, no further recommendations. No follow up required	Mardi	N/A	С
132430 (132429) 2023-11-18	С	REFER TO VGH JOHSC Reminder to include in reports any detail that can indicate the risk factors regarding the transmission of infectious materials (e.g. language such as naïve, containment level, clean gloves, substance names and quantity etc.)	Mardi	N/A	N/A
132423 (132411) 2023-11-14	С	Other: An air flow shutdown was scheduled by B.Ops to reset the HVAC system in LSC high containment area after a power outage which occurred on a weekend. A staff member was still inside the lab and reported feeling change in pressure and was concerned about breach of containment to the lab. Staff member had already stored away biosafety chemicals and no biohazards were present at the time of the shutdown. Root Cause: Miscommunication. Manager did not follow SOP and approved the HVAC shutdown before confirming building was vacant. The list of occupants outside the lab had not been updated and was not checked prior. Potentially further miscommunication over the phone. Corrective Actions: Agreed by all parties that in future a physical sweep of the building will occur before performing a shutdown. Biosafety Office determined there was no breach of containments/ no reportable exposure. Incident needs to be discussed at FoS JOHSC before CAIRS report can be closed to ensure any recommendations from that committee are added to report. Committee noted the initial report was written during heightened stress and has since been changed with more neutral language. Action: Pierre to check if SOP for shutdown has been updated. Pierre to ask if occupants of the facility are notified about shutdowns (and how this is done) prior to them occurring.	Pierre	1/16/24	IP



7. a) REVIEW OF	7. a) REVIEW OF NEW CAIRS INCIDENT / ACCIDENT REPORTS (as per attached meeting package)						
132409 (132404) 2023-11-14	С	Other (Caught under): Submission of supervisor report. Report reviewed last month, please refer to previous minutes. No further action required	Mardi	N/A	С		

7. b) REVIEW OF OPEN/ON-GOING CAIRS INCIDENT/ACCIDENT REPORTS (* See Legend at end for Priority and Status Codes in 7a above) Item# Action Plan Assigned Follow up: (Use CAIRS Incident Priority Status (Actions Taken/Need to be taken) ID # and Incident То **Date Pending** Date) Other: Equipment/ Facility Failure: Staff at an off-site location were in meeting room when they noticed ceiling panels (wooden) had started to dislodge. Upon investigating, tenants from downstairs were on the roof doing maintenance causing ceiling panels to move. Staff were sent home for the day. Tenants requested the building's landlord to check all panels are securely in place and 132402 С Mardi 12/19/23 С 2023-11-10 not going to fall. **Update 12/19:** UBC Facilities Team and architect visited the site to check the landlord's fix was satisfactory. Landlord communicated that only certified contractors are to go onto the roof with prior notification. Mardi to update language to ensure the type of panel is clear. **Needle Stick:** First year medical student on practicum at family practice stuck themselves when giving a vaccination. Student did not immediately go for BBF follow up, but went to Emerge after discussing with H&S. 132326 (132325) Root cause: In between student administering vaccine and retrieving band-aid С Mardi N/A C 2023-11-02 for patient, student grazed the used, yet-to-be disposed needle. Preceptor provided first aid and reviewed precautions when handling needles. **Update 12/19:** Feedback has been given to first year med team. All corrective actions complete Needle Stick: Student assisting during surgery was stuck by another physician's suture. Student reported immediately and sent to Emerge. Student and 132288 C physician discussed how to better work together in close proximity to mitigate. N/A C Mardi 2023-10-27 Root cause: Multiple people working in small area. Mardi to add worker rep. All corrective actions complete



7. b) REVIEW OF	OPEN/OI	N-GOING CAIRS INCIDENT/ACCIDENT REPORTS			
132173 (132157) 2023-10-03	C	Needle Stick: Learner provided feedback about BBF follow-up procedure and wondered if test kits could be available in common locations e.g. surgery units to expedite the blood sample process post-exposure. Committee discussed the applicability of consent forms for patients and whether kits would be viable given consumable shelf-life. Actions: Nick discussing practicality of pre-built blood kits with program leaders. An update will be provided next meeting. Update 11/21: Nick connected with faculty lead for guidance, additional faculty included. Waiting to hear suggestions on practicality of pre-built kits. Update 12/19: No update this month. Committee asked the reason why students need to go immediately to ER for bloodwork if risk of high risk patient had not had time to enter bloodstream. The reason is to gain an initial baseline in the bloodwork as well as immunity review with ER doctor that Students have said is valuable to manage stress. The student can be prescribed anti-viral treatment without delay if exposure is high risk. Student will be asked for further blood work for comparison, particularly if patient is high risk. If patient has no known risk students will often forgo follow up testing. Action: Nick to provide updates as they become available	Nick	1/16/24	IP
132026 (132024) 2023-09-16	В	Spill at BCCHRI: Lab member carrying ~1L bottle of 4% Paraformaldehyde (PFA) to fume hood dropped and broke bottle. No injuries. Root Cause: Not a good understanding of procedures, no SWP provided so far. Update 11/21: Redistributed spill procedures document after misunderstanding of who to contact. Work procedures a responsibility of each lab, which includes chemical spills in SWP. LST coming up with corrective actions that can be applied campus wide. SRS Chem Associate invited to upcoming meeting to assist with the review. Update 12/19: No response from preceptor following investigation. Important to engage preceptor as much as possible and ensure they know their responsibilities to provide direction. Supervisor needs to be aware of corrective actions on holistic level as well as on a lab level. Action: Mardi to follow up with PI in New Year	Mardi	1/16/24	IP
131925 (131832) 2023-08-18	С	EPIM: Radiology fellow splashed with patient body fluids in eye and face. Investigation form complete. Mardi reached out to radiology group to make sure they know PPE is available to them with no response.	Mardi	N/A	С



7.	7. b) REVIEW OF OPEN/ON-GOING CAIRS INCIDENT/ACCIDENT REPORTS				
		Action: Mardi to continue to contact group to communicate their choice on PPE. Update 11/21: No response from people listed on report. Update 12/19: Masks with sheet of see through plastic are supplied but not mandated. Noted the importance of doing risk assessment if splash risk is present. Contact precautions are required to be signposted if mandatory PPE is required. Students are encouraged to discuss PCRA with their preceptors. No further action required			

8. ONGOING BUSINESS – Status of Action Items							
Original Item #	Original Item # Priority Action Plan (Actions Taken/Need to be taken)		Assigned To	Follow up: Date Pending	Status		
NB-23/02/21-01	E	Life Sciences LST brought forward a concern regarding the Emergency Eyewash Stations. See February 2023 minutes. Update 11/21: Installation of water pumps and tanks scheduled December 2 nd Update 12/19: Installation is complete, testing for pressure and temperature will begin in the new year. Thanks to 5 th floor LSC for attention and diligence in closing action. Action: LSC Safety / Operations to retest all LSC sink-based eyewash stations (for water temperature and pressure) in the early new year. Pierre to update on results of testing when completed.	Pierre	1/11/23	IP		
Evacuation at UBCO highlighted gaps in communication from Faculty of Medicine staff. Alerts on app are linked through Workday, so staff whose programs are listed as Vancouver but are working at UBCO did not receive alerts. Fire alarms were pulled to ensure people were evacuated when order came through. The issue is being looked at but the integration between Workday and UBC Safe app means it is complicated to rectify. There is an open ticket with UBC IT who are working with UBCO staff. In the time being staff are signing up for local registers to ensure everyone is notified should something similar occur. Update 21/11: Issue is still being worked on in Workday. Backup plan in emergencies is still to pull emergency alarm to facilitate building evacuation. Update 12/19: No update this month Action: Nick to give updates as they are available		Nick	12/19/23	IP			



8. ONGOING BUSINESS – Status of Action Items						
SRS-23/09/30	E	Mask update—FYI there is no requirement to wear a mask on UBC premises. Starting October 3 masks will be required in patient care areas. Committee asked about the distribution of RATs and masks nearing expiry. Update 11/21: There is excess stock of masks and RATs available that have not expired- both medical and non-medical for anyone who wants them. Committee suggested mentioning at UBC Department Heads meeting on December 6. Update 12/19: Approximately 3000 new and compostable masks are available. Sunny has communicated that masks are available from nicks office. Committee asked if wrapped n95 masks that are expired can be used during an earthquake. Nick let committee know masks expire as their charge attracts particles which becomes less effective over time. Unsure if n95 masks are also ionized or charged, but they fine to keep as they are better than nothing in the event of an earthquake. No further action required	Nick/Sunny	N/A	С	

9. JOHSC FORMA	9. JOHSC FORMAL RECOMMENDATION LETTERS & REGULATORY INSPECTIONS (e.g. WorkSafeBC)							
Item # (use Recommendation or Report #)	Priority	Discussion and/or Action Items	Assigned To	Date of Issue	Date to be Completed	Status		
IR #202316973116A	E	Receipt and acceptance of the incident report. Reminder that incident investigations must be completed within 30 days, with description, unsafe conditions, contributors, causes, corrective actions, and worker rep participation.	N/A	11/3/2023	N/A	С		
IR #202316973122A	E	Receipt and acceptance of the incident report. As a reminder, any workplace incident and all other immediately reportable incidents must be reported to Campus Security as part of the incident response. More information regarding what to do in the event of a serious incidents can be found on the SRS Website. Incidents and near misses must be reported into CAIRS within 48 hours of the occurrence so that a preliminary investigation can be completed. Reminder that incident	N/A	11/14/2023	N/A	С		



	investigations require a site visit that must be completed		
	within 30 days.		

^{*} REC – Recommendation Letter *IR – WorkSafeBC Regulatory Inspection

10. REVIEW EDUCATION AND TRAINING

(General discussion, confirm all training is up-to-date, etc. For all actionable items please list below)

• Committee members can find Operations & Safety learning courses here: https://wpl.ubc.ca/?query=OSSY.

Item # (ED-yd/mm/dd-01)	I Priority I		Assigned To	Follow up: Date Pending	Status
ED-23/09/19	С	Jharmela is required to complete training on WPL.	Jharmela	02/17/24	IP
ED-23/11/21-02	С	 Poll was sent to members to solicit feedback about additional education topics. Results from survey showed most popular topic are metal health/ wellbeing, ergonomics, occupational hazards and crisis support. Ideas for guest speakers: Blue folder/ green folder programme, which intersects with students. HLI Safety Day had the Wellbeing team do a presentation on mental health that we could ask to attend Stressors & personal distraction in the workplace Committee agreed if presentations are HR-specific, we can circulate & promote rather than double up. Actions: Please bring ideas of topics covered/ people to present on specific topic or email ideas to the FoM inbox fom.safety@ubc.ca 	ALL	1/16/24	IP

^{*} ED – Education and Training

11. SAFETY & RISK SERVICES UPDATE							
Item # Action Plan (SRS-yy/mm/dd) (Actions Taken/Need to be taken)		Assigned To	Date to be Completed	Status			
SRS-23/10/26	E	 Silica Exposure Control Plan (ECP) Feedback due January 30. Lead Exposure Control Plan and Training Course available to those interested via <u>Qualtrics Survey</u> Preparing for Extreme Winter Weather at UBC 	N/A	N/A	С		



 Reminder to regularly check the website for weather updates and snow clearance. There is a map available detailing ice prevention and snow removal with prioritised areas/ roads and walkways. We also have distributed sites (UVic, UNBC) within the FoM so individuals will need to take into consideration what is the protocol of their specific site for extreme weather.
Annual Seasonal Shutdown and Holiday Tips shared.

12. NEW BUSINES	SS				
Item # (NB-yy/mm/dd-01)	Priority	Action Plan (Actions Taken/Need to be taken)	Assigned To	Date to be Completed	Status
Annual Evaluation: Goal setting for 2024. Opportunity 1: communication between JOHSC & Faculty & Staff. - Committee could collect relevant information quarterly and send out from Co-Chair email to relevant distribution groups - Committee agreed the type of communication (e.g. event, safety topic, LST-specific information) should determine which distribution list is used Committee liked the idea of inviting more LST members to give updates throughout 2024 and will keep this in mind when scope changes in 2024. Future goals will be set when committee scope is narrowed.		ALL	1/16/24	ΙP	
NB-23/12/19-01 E Microtome Guidance I available on the SRS w		Microtome Guidance Document: Document has now been published and is available on the SRS website for distribution. Thank you for contributions from this committee and helping with draft document earlier this year.	N/A	N/A	С
NB-23/12/19-02 E 2024 Meeting Schedule: Decided by committee to keep meeting as third Tuesday of month at 10am for 2024.		N/A	N/A	С	
NB-23/12/19-03	E	2024 Inspection Initiative: Self-directed inspection survey will be posted early January 2024. Communications will be posted on MedNet and emailed from FoM team. This will fulfil the WorkSafeBC requirement to regularly check workstations, but not replace need to inspect shared space/common areas and labs. Prizes will be available for participants.	N/A	N/A	С



13. NEXT I	MEETING
Date:	January 16, 2024
Time:	10:00am
Location:	Zoom

14. MEETING ADJOURNED			
Time:	11:15 AM		

LEGEND

PRIORI	TY:	STATUS:			
Α	Critical/Life threatening/high probability	N	New		
В	Urgent/moderate probability of re-occurrence	R	Repeat		
С	Important/low probability of re-occurrence	С	Complete		
D	Reminders	IP	In Progress		
Е	Information	RF	Referred forward		

Monthly Distribution and Posting of Approved Meeting Minutes (Required):

- Responsible VP
- Responsible Managing Director/Dean
- All JOHSC members

- Internal Communications Person
- Safety & Risk Services <u>ubcsafety.committee@ubc.ca</u>
- Posted on any Safety Bulletin Boards (if applicable)