## VGH Joint Occupational Health \& Safety Committee Meeting Minutes

| Name of |
| ---: | ---: |
| Committee: | VGH JOHSC

Date:

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February 1, }202
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## AGENDA

1. Roll Call
2. Determination of Quorum
3. Approval of Previous Joint Occupational Health and Safety Committee (JOHSC) Meeting Minutes

- January JOHSC Minutes

4. Approval of Agenda

- Additional Agenda Items per committee members

5. a) Review NEW Centralized Accident/Incident Reporting System (CAIRS) report of Accidents/Incidents

- New CAIRS reports
- PHSA Reports, if applicable
b) Review Accident/Incident reports with ongoing action items

6. Review Workplace Safety Inspections (including any changes to equipment, machinery or work processes that may affect the health or safety of workers)

- Research Pavilion Schedule
- Review any other Inspections Submitted for JOHSC attention
- Faculty of Medicine Space Reviews

7. Review Education and Training

- New Member training: https://safetycommittees.ubc.ca/training-calendar/
- 2024 VCH Safety Summit- May 6

8. Ongoing Business - Status of Action Items

- Fumes in JBRC MAF - update on outstanding corrective actions
- Health \& Safety Boards
- Chem Waste Room JBRC 113 - Karen to update committee on recommendations
- SDS out of date

9. JOHSC Formal Recommendation Letters \& Regulatory Inspections

- See WSBC attachments in SRS Co-chair email

10. Safety and Risk Services Update

- Interim PIA Guidelines: Generative AI Tools
- SRS Co-Chair email

11. Facility Updates

- Fume Hoods
- MAF Barrier Leak - Drilling Concern
- Elevators

12. New and Other Business

- CO2 Cylinders when Elevators are down

13. Next Meeting: March 7, 2024
14. Meeting Adjournment


## 2. DETERMINATION OF QUORUM

a. A minimum of 4 members;
b. Worker representatives (faculty and staff workers who do not exercise managerial functions) and employer representatives (management workers who exercise managerial functions);
c. At least half of the members must be worker representatives;

Is there quorum for this meeting

* If quorum is not met, the meeting does not qualify as a monthly meeting. The monthly meeting will need to be
rescheduled within the same month.

|  |
| ---: | ---: |

## 3. APPROVAL OF PREVIOUS JOHSC MEETING MINUTES

(Statement to indicate minutes of previous meeting have been read \& acknowledged and to record any corrections to it) January JOHSC Minutes

- The committee members present in February did not know the Last Name of the guest last month 'Angela'. Reminder to committee members guests can be authorized by the co-chairs, cc' Madeline to forward the calendar invite.

| - Move to adopt minutes. | Moved by: Susan Moore |  |
| :--- | :--- | :--- | :--- | :--- |
| Are the minutes approved? | Mes by: | No |

## 4. ADDITIONAL AGENDA ITEMS \& APPROVAL OF AGENDA

- NB- Mold in JBRC


## 4 A. 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.
$\boxtimes$ No actionable items noted

| Is the agenda approved? | Yes | No |
| :--- | :---: | :---: |
| $\square$ |  |  |

## REVIEW NEW CAIRS REPORT OF ACCIDENTS/INCIDENTS:

See attached incident report:

- Monthly Incident List \& Statistical Summary Report (For any general 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)

| Item \# <br> (Use CAIRS Incident ID \# and Incident Date) | Priority | Action Plan <br> (Actions Taken/Need to be taken) | Assigned To | Follow up: Date Pending | Status |
| :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{gathered} 133695 \\ 2024-01-18 \end{gathered}$ | C | REFERRED TO BCCRC/ AW JOHSC | N/A | N/A | C |
| $\begin{gathered} 133656 \text { (133655) } \\ 2023-08-19 \end{gathered}$ | C | Needlestick: Medical student may have received needle stick as they noticed a puncture in their glove while performing clinical procedure. No obvious puncture wound was found. <br> Corrective actions: Student reviewed best practice techniques with preceptor. Incident reviewed by Point Grey JOHSC <br> No further JOHSC action required | N/A | N/A | C |
| $\begin{gathered} 133721 \\ 2024-01-23 \end{gathered}$ | C | Other: Worker was moving a carousel used for holding animal cages through a doorway and jammed hands on either side of doorframe. The size of the carousel leaves little room to fit through the door jam, requiring it to be pushed through the door to fit. Worker grabbed and pulled the carousel through the door and caught their fingers. Worker was given a cold pack but declined first aid. No lasting issues. <br> Root cause: Inexperience and not paying attention. Worker is newer and unaware of size of rack compared to doorway. <br> Corrective actions: Reviewed how to move racks with worker <br> Actions: Steph to complete supervisor's report | Steph | 03/07/24 | IP |
| $\begin{gathered} 133646 \\ 2024-01-05 \text { to } \\ 2024-01-05 \end{gathered}$ | C | Bodily Reaction: Worker performed husbandry check with no PPE and had allergic reaction on arms to hay that was being carried. Noted it is common for workers to experience allergic reactions, and PPE is always available. Workers are trained, and have plenty of PPE options. Original fit test for respirator was done for the worker. Disposable n95s are also available in several sizes for workers. | Steph | N/A | C |


|  |  | Root cause: Worker not paying attention and not wearing PPE which has been provided to them <br> Corrective actions: Policies and procedures were reviewed with worker No further action required |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{gathered} 133757 \\ 2024-01-16 \end{gathered}$ | C | REPORT NOT SENT TO JOHSC <br> Dip/Shrug incident: Student was assisting person with rehabilitation equipment, and was hit in the face (close to the eye) by arm of machine. First aid was initially declined, after a few days began to experience concussion symptoms and eyesight issues. <br> Root Cause: the student adjusted machine while under load (~301b) Other Factors that require Resolution: <br> - The injured student wasn't sure if they were covered by WSBC. Mardi to connect with PARC Manager about student agreements \& including insurance information in their onboarding <br> - The injured person declined first aid but may have been a bit shocked, not fully understood the severity of the incident at the time it happened. Recommend the use of First Aid is promoted in the facility <br> - The supervisor/PARC manager misunderstood who could complete the CAIRS report so there was a delay in reporting. In addition to this, the person's symptoms worsened after the incident so the severity on the day wasn't clear. Committee is reminded that CAIRS is a public forum and anyone can submit a report. Inaccurate information can be change retrospectively, it is better to submit a report as soon as an incident occurs. <br> Actions: Mardi to report back to committee with investigation updates | Mardi | 03/07/24 | IP |
| INCIDENT/ACCIDENT INVESTIGATIONS WITH OPEN ACTIONS FROM PREVIOUS MEETING |  |  |  |  |  |
| $\begin{gathered} 132456 \\ 2023-11-21 \end{gathered}$ | C | Contact with chemicals: Student was cleaning cabinet under fume hood, where there were a number of buffers and oxidizers including perchloric acid. Offgassing was present, IP noted odor and irritation in right eye. They stopped work immediately and washed hands and face. Accident was not immediately reported, only after mentioning to another staff member they were feeling unwell. Worker rep: Eunice <br> Corrective Actions: Susan contacted Peggy for assistance with clearing excess chemicals. All chemicals have now been cleared. New tenants of the space have been advised they will need new cabinets for chemicals. Susan to provide update in January | Susan/ <br> Mardi | 3/7/2024 | IP |


|  |  | Update 1/11: Chemical waste has been cleared except for one unknown chemical, but because Perchloride was found, the fume hood needs testing. See Working with Perchloric Acid Safe Working Procedure (PDF). Susan to contact Peggy regarding perchloride testing for fumehood and disposal of unknown chemical found during decommissioning. <br> Update 2/1: Student is now working under new supervisor. Susan and Mardi to confirm what type of fume hood testing/cleaning needs to occur for lab decommissioning. SWP has been distributed, please circulate with groups. Reminder to keep chem inventories up to date. Ordering groups have been notified that there are no self-flushing hoods on site so perchloric acid should not be ordered. Fume hood in JBRC413 is being tested to check for residual particles. Lab Decommissioning checklist can be completed once fumehood plan confirmed. Susan confirmed fume hood contractor is scheduled to do testing on Feb $26{ }^{\text {th }}$. |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{gathered} 132557 \text { (132546) } \\ 2023-12-06 \end{gathered}$ | C | CAIRS gel comb incident to review: Occurred at BCCHRI. Stacking gel was poured into the gel apparatus until full for an SDS-PAGE. Insertion of the gel comb caused some of the unpolymerized liquid to spill out and land on worker's pants - wasn't wearing lab coat at time of incident. Committee agreed with review of required PPE (eye protection in addition to mandatory lab coat). Mardi brought to VGH committee to ask if they have an existing SOP to review. Mitali to send Mardi existing procedure which details how to push comb on an angle to mitigate splashback. <br> Update 2/1: Mitali provided information to pass on | Mitali/ <br> Mardi | N/A | C |
| $\begin{gathered} 133674(133672) \\ 2024-01-13 \end{gathered}$ | C | REPORT NOT SENT TO JOHSC <br> Sharp contact: Worker was attaching glass pipette to aspirating tube when pipette broke cutting finger through their glove. Corrective actions have been discussed at Lab Rep meetings. <br> Root cause: Left-hand person working in a BSC set up for right-handed person resulting in awkward hand placement <br> Corrective actions: Electric pump on right hand side of BSC moved to the center to accommodate for both left and right handers. Aspirating tubing replaced with longer tube so that it can be maneuvered more easily to either side. <br> All corrective actions complete. Final report has been submitted No further action required | Susan/ <br> Mitali | 3/7/2024 | C |

6. REVIEW OF WORKPLACE SAFETY INSPECTIONS (including any changes to equipment, machinery or work processes that may affect the health or safety of workers)
Distribute inspection checklist(s) and report(s) for meeting and use this table to record discussion and new recommendation(s)No Inspections Scheduled: no reports to reviewInspections complete with no JOHSC follow up required: naming conventions listed belowInspections were delayed. Plan for rescheduling / follow up listed belowInspections require JOHSC action: listed belowReports were added to SharePoint
Link to Research Pavilion Schedule.

| Item \# <br> (Use Inspection \#) | Priority | Action Plan <br> (Actions Taken/Need to be taken) | Assigned To | Follow up: Date Pending | Status |
| :---: | :---: | :---: | :---: | :---: | :---: |
| GI- APEL Biobank- 2023-10-05-02 | C | Research Pavilion: APEL Lab and Biobank <br> Scheduled for November $9^{\text {th }}$ <br> Update 12/7: Report is being finalized, Karen to distribute. <br> Update 1/11: Referred Forward <br> Update 2/1: Karen to finalize report | Joanne and Karen | 03-07-24 | IP |
| $\begin{aligned} & \text { GI-Psychiatry- } \\ & 2073-10-05-04 \end{aligned}$ | C | Psychiatry: <br> Mitali / Danmei: Report sent to Karen. Missing emergency information which Danmei sent, also missing Fire Alarm procedure. All other inspection items resolved. Karen to send Danmei fire alarm procedure Update 1/11: Referred Forward Update 2/1: Karen following up, has not heard back from PI. Wet lab is shared with multiple others that Karen is following up. Rooms 300, 315 are included in $3^{\text {rd }}$ floor wet lab that Ming-Wan is finishing with Kate | Karen | 03-07-24 | IP |
| Space Review Actions | D | Space Review: Outstanding action items from previous Space Reviews to be closed off. Committee agreed to set up sub-committee with action owners to close off and assist with outstanding actions. Sub-committee will aim to meet bi-monthly until actions are closed. IRC have requested update on where space review action logs are with outstanding actions. Thank you Yuan and iCord team for completing space review actions. Mardi to set up meeting with Karen and Susan Update 1/11: Referred forward | Mardi | 03-07-24 | IP |

6. REVIEW OF WORKPLACE SAFETY INSPECTIONS (including any changes to equipment, machinery or work processes that may affect the health or safety of workers)

|  |  | Update 2/1: Karen to go through with Mardi to check whether outstanding <br> items are still relevant. Mardi to call Karen and set up a time to discuss |  |  |
| :---: | :---: | :--- | :---: | :---: |
| Upcoming <br> Inspections | E | $\underline{\text { 3rd Floor Wet Lab }}$Ming-Wan <br> and Kate | $03-07-24$ | IP |
| Inspection survey | E | Inspection Survey SRS released inspection survey for use in administrative <br> areas. Closes 2 Feb <br> Action: Mardi to provide summary on inspection survey findings at next <br> meeting | Mardi | $03-07-24$ |

* GI - General Inspection

| 7. REVIEW EDUCATION AND TRAINING |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| (General discussion, confirm all training is up-to-date, etc. For all actionable items please list below) |  |  |  |  |  |
| Item \# (ED-yy/mm/dd-01) | Priority | Action Plan <br> (Actions Taken/Need to be taken) | Assigned To | Follow up: Date Pending | Status |
| ED-24/02/01-01 | E | 2024 VCH Safety Summit May 6 <br> Action: Karen to send out email with registration details | ALL | N/A | C |
| ED-24/02/01-02 | E | Outstanding members for JOHSC Training: Andee and Steph | Andee/ Steph | 03-07-24 | IP |

* ED - Education and Training

| 8. ONGOING BUSINESS - Status of Action Items |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Original Item \# | Priority | Action Plan <br> (Actions Taken/Need to be taken) | Assigned To | Follow up: <br> Date Pending | Status |
| $\begin{gathered} \hline 132237(132164) \\ \text { and } 132165 \\ 2023-09-21 \\ \\ 132166 \\ 2023-10-05 \\ \hline \end{gathered}$ | B | Bodily Reaction: Staff experienced headache and nausea after exposure to diesel fumes. See "HS Report_Fumes Detected in JBRC" <br> Update12/7: A group has been formed that has joined VCH facilities to bring in external consultants to look at the fumes issue. Charcoal filters have been installed and other long-term solutions are being investigated. Fumes are from diesel generators and maintenance staff. VCH are planning to ban diesel | Mardi/ Karen | 03-07-24 | IP |


| 8. ONGOING BUSINESS - Status of Action Items |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | powered landscape tools which will eliminate fumes from landscape tools. Hospital is undertaking more construction at VGH and need to add more generators for work required, plan has been revisited to relocate generators to green space between JBRC and Diamond HCC. They may also be positioned higher than previous generators, bypassing intakes at lower levels. Testing is happening more frequently, and are being used early in the morning. <br> Update 1/11: Noted that when tests have been completed lately fumes are significantly reduced due to filters and no impact to staff. Issue has been verbally discussed with workers; MAF has local fume response procedure in place. <br> Update 2/1: Facilities are still investigating airflow system to find source of issue. Fumes may increase when area at the front of the building is tarred. VCH has been asked to provide more notice for upcoming work to ensure there is sufficient time to inform workers and make adjustments to their work |  |  |  |
| NB-23/11/02-02 | D | Committee members are asked to keep health \& safety boards up to date. Minimum requirements are: <br> - Approved meeting minutes from the last 3 months <br> - WSBC Inspection Reports specific to the work area <br> - Contact list for department members <br> Update 12/7: Changes have been made per committee recommendation Karen to help Mitali to get jack activated for a phone in the basement. May have to wait until construction is complete first. <br> Update 1/11: Phone to be followed up. Madeline has emailed committee contact details and previous 3 months of approved minutes for H\&S boards. <br> Update $2 / 1$ : All committee members have been added to new SharePoint site. Minutes will be uploaded once approved. A hyperlink to the SharePoint site will be added to the bottom of future minutes | N/A | N/A | C |
| NB-23-12-07-02 | C | Chemical Waste room JBRC 113 flagged by VCH: VCH insurers did a review of the room and has recommended ventilated cabinets to meet with BC Fire Code. Cabinets do not need to be ventilated but there does need to be ventilation within the room. Karen and Susan have looked into the issue and have consulted with Peggy. More waste is anticipated while other research rooms are being decommissioned. Bigger cabinets are being looked into, as well as a | Karen/ Susan | 03-07-24 | IP |


| 8. ONGOING BUSINESS - Status of Action Items |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | way to remove clutter from on top of the cabinets. Venting is also possible with double doors. <br> Update $1 / 11$ : Chemical waste room is currently full with chemicals from decommissioned lab. Susan informed room does not require venting for flammables cabinet. A work order has been submitted to put vent into door for more ventilation without putting vent to outside of the building as is not possible. Susan/ Karen to provide update when room has had vent installed Update 2/1: Work order has been submitted for new door with grill however facilities are only working on urgent requests currently. Karen asked Peggy to look at the room to get recommendations. Cabinets do not need to be ventilated but if they do need to be replaced, may be able to purchase larger cabinet to hold more chemicals depending on the volume of chemicals allowed. Next disposal is scheduled for Feb 14. |  |  |  |
| NB-24/01/11-02 | C | Mitali found an SDS for poly-L-lysine was out of compliance as it had not been renewed by the supplier since 2016. Mitali contacted them with no reply yet. Mardi advised to contact company again and press them for update SDS. If no response please contact Mardi to follow up. <br> Update 2/1: No further action required. Mitali contacted the supplier and the updated SDS is now available online. | Mitali | N/A | C |


| 9. JOHSC FORMAL RECOMMENDATION LETTERS \& REGULATORY INSPECTIONS (e.g. WorkSafeBC) |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Item \# <br> (use <br> Recommendation <br> or Report \#) | Priority |  | Assigned <br> To | Date of <br> Issue | Date to be <br> Completed | Status <br> IR \# <br> $202416973009 A$ |
| E | On January 22, 2024, a worker sustained an injury after falling four <br> feet above grade while pulling material from under a tarp. Incident <br> occurred on UBC campus. | $\mathrm{N} / \mathrm{A}$ | $2024-23-01$ | $\mathrm{~N} / \mathrm{A}$ | C |  |

* REC - Recommendation Letter *IR - WorkSafeBC Regulatory Inspection


## 10. SAFETY \& RISK SERVICES UPDATE

| Item \# (SRS-yy/mm/dd) | Priority | Action Plan <br> (Actions Taken/Need to be taken) | Assigned To | Date to be Completed | Status |
| :---: | :---: | :---: | :---: | :---: | :---: |
| SRS-24-01/25 | E | - UBC BERP template has been updated. A reminder to check your Building Emergency Response Plan annually. <br> - FYI- WorkSafeBC has made amendments to the Workers' Compensation Act focusing on 'Duty to Cooperate \& Duty to Maintain Employment'. This refers to Return-To-Work processes and accommodation process. <br> - Pink Shirt Day- Feb 28, a reminder to speak to UBCs Respectful Environment statement. <br> - SRS shared the Interim Privacy guideline for using Chat GPT/Al technology at UBC. | ALL | N/A | C |


| 11. FACILITIES UPDATES |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Original Item \# | Priority | Action Plan <br> (Actions Taken/Need to be taken) | Assigned To | Follow up: <br> Date Pending | Status |
| VCH-23/10/05-02 | B | Fume hoods: Maintenance staff are working in mechanical areas to complete more repairs. <br> Update 2/1: Maintenance confirmed fume hoods are working. Rain City review fume hoods when needed. Last year not all passed due to change in air handlers, but are still safe to use and not needed to be rechecked. Fumehoods in Research Pavilion are being replaced. These were scheduled to be installed on Feb $5^{\text {th }}$ however sink needs to be removed in order to get fumehood into room. <br> Actions: Karen to facilitate plumbing an HVAC contractor to prepare for fumehood installation | Karen | 3/7/2024 | IP |
| VCH-23/10/05-04 | B | Leaks: Leak in OR has been fixed. Leak in Barrier is ongoing concern, water flowing in between where phases 1 and 2 meet. Location of leak has impacted animals as housing room has been hoarded off resulting in room and equipment inside inaccessible. Previous fixes to walkway were unsuccessful. Leak is currently contained, however dripping around catchment bucket. Facilities have taken as far as possible, issue escalated to Senior Management. No updates on next steps yet. | Karen | 2/1/2023 | IP |


| 11. FACILITIES UPDATES |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Update 12/7: JBRC group working on leaks with VCH in the new year. Work has been delayed until after December break. Kate/Karen to provide updates as they become available. <br> Update 1/11: Leaks have been identified and trough system in ceiling between $2^{\text {nd }}$ and $3^{\text {rd }}$ floor has been installed to send water to sump outside. Less water is coming in as it is now being redirected. One leak left that isn't 'managed'. A lot of damage under tiles and ground level. More remediation work expected. <br> Concern: Drilling has affected $2^{\text {nd }}$ and $3^{\text {rd }}$ floor, causing cell lines and results of running western gels to be affected from smaller equipment moving with vibration. If more drilling is expected employees will be given notice. People may need to temporarily move to higher floors or different buildings to not impact tests. <br> Update 2/1: Short term remediation plan is to fill with gravel and paving stones until root of the problem is identified as exploration is ongoing. Long-term plan to replace compromised infrastructure but this cannot happen until issue is identified. <br> Action: Karen/ Kate to provide updates as they are available. |  |  |  |
| VCH-23/10/05-01 | B | Elevators: Robert Ho elevator currently functioning between floors but cannot call from the lobby. It also requires other parts to be replaced which are in order. JBRC elevator \#2 waiting for parts. Karen has refrained from sending emails every time elevator starts/stops working due to multiple buildings affected where people crossover to use both elevators. Occupants were getting confused. Updates will be circulated when repairs are confirmed. Issue with call button and panel inside cab which are awaiting new parts. Parts have been delayed. <br> A new VP of Research is being recruited, who has been tasked with supporting infrastructure and building initiatives. <br> Actions: Karen to provide updates as they are available. | Karen | 3/7/2024 | IP |

## 12. NEW \& OTHER BUSINESS

- General discussion items (list actionable items below)
- Mold in JBRC

| Item \# <br> (NB-yy/mm/dd-01) | Priority | Action Plan <br> (Actions Taken/Need to be taken) | Assigned To | Date to be Completed | Status |
| :---: | :---: | :---: | :---: | :---: | :---: |
| NB-24/02/01-01 | D | CO2 Cylinders when Elevators are down <br> Noted it is very unsafe to manually move cylinders in stairwell if CO2 needs to be replenished while elevators are not working as they could become projectiles. Knowing that elevators could go down, labs will need their own contingency plan such as reordering before they empty or storing extras in lab space. <br> Action: Karen to send building-wide email to communicate that people need their own plans on how to access CO2. | ALL | 03-07-24 | IP |
| NB-24/02/01-02 | E | Mold in JBRC - Mold has been noted on vents and fumehoods of $4^{\text {th }}$ floor of JBRC, affecting south end affecting Immunity and Infection research group who conducted their own mold growth tests. Occupants previously reported issues with black particles coming down through air vents, FMO brought in extremal contractors to clean all the vents. Current mold issue was reported to FMO before Christmas, Proactive Hazmat onsite to test; awaiting report. Reminder to report any signs of mold such as peeling paint, particles, discoloration, soft walls, or allergies to trigger an air quality assessment. <br> Actions: Karen to provide updates as they are available. | Karen | 03-07-24 | IP |

*NB - New Business

| 13. NEXT | MEETING |
| :--- | :--- |
| Date: | March 7, 2024 |
| Time: | 10:00 AM |
| Location: | Zoom |

## 14. MEETING ADJOURNED <br> Time: <br> 11:15 AM

## LEGEND

STATUS:

| A | Critical/Life threatening/high probability | N | New |
| :---: | :--- | :---: | :--- |
| B | Urgent/moderate probability of re-occurrence | R | Repeat |
| C | Important/low probability of re-occurrence | C | Complete |
| D | Reminders | IP | In Progress |
| E | Information | RF | Referred forward |

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

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


## Posting of Approved Meeting Minutes (Required):

- JBRC: IIRC $-4^{\text {th }}$ floor \& on-line
- RHNH: $7^{\text {th }}$ Floor
- ECC: Room 379
- JBRC: VPC $-5^{\text {th }}$ Floor
- VGH SharePoint site
- Internal Communications Person
- Safety \& Risk Services ubcsafety.committee@ubc.ca
- Posted on any Safety Bulletin Boards
- Skin Science (Dermatology): TBD
- VPC Common Drive (employees access only)
- RP: $1^{\text {st }}$ floor mailroom 100
- Blusson: Ground floor by deliveries

