

# VGH Joint Occupational Health & Safety Committee Meeting Minutes

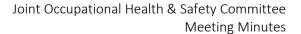
Name of Committee:	VGH JOHSC	Worker Co-Chair:	Dr Susan Moore
Committee:	Vallaciae	Employer Co-Chair:	Karen Donaldson
Data	March 7, 2024	Time:	10:00 AM
Date:	Warch 7, 2024	Location:	Zoom

#### **AGENDA**

- 1. Roll Call
  - New Guest: BCCDC Lab Member
- **2.** Determination of Quorum
- **3.** Approval of Previous Joint Occupational Health and Safety Committee (JOHSC) Meeting Minutes
  - February 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
    - 132456: Chemical Exposure while cleaning out cabinets in JBRC
    - 133721: hand injury Awaiting supervisor's report
    - 133757: PARC eye injury using dip/shrug machine awaiting information from Kinesiology
    - 133674: (FoS) L handed person using BSC got a cut awaiting final report
- **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:

- Scheduled Inspections:
  - Islet Lab 4th Floor Wet Lab (Yuan, Mitali)
- Review any other Inspections Submitted for JOHSC attention
  - VGH Summary of FOM Annual Administrative Survey
- Faculty of Medicine Space Reviews
  - Action: Mardi to set up working group meeting
- **7.** Review Education and Training
  - New Member training: Andee and Steph due in March 2024
- **8.** Ongoing Business Status of Action Items
  - Fumes in JBRC MAF update on outstanding corrective actions
  - Chem Waste Room JBRC 113 Karen to update committee on recommendations
  - CO2 Cylinders when Elevators are down
  - Mold in JBRC Room 410
- **9.** JOHSC Formal Recommendation Letters & Regulatory Inspections
  - See WSBC attachments in SRS Co-chair email
- **10.** Safety and Risk Services Update
  - SRS Co-Chair email
- **11.** Facility Updates
  - Fume Hoods
  - MAF Barrier Leak Drilling Concern
  - Elevators

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- Completed & Submitted for Review: Gl-Research Pavilion 196/196A-23/10/30
- Outstanding Reports:
  - APEL & Biobank: Karen/Joanne to provide update
  - Road Safety 2nd Floor Dry Lab (Eunice/Mitali)
  - Shared Labs 3rd floor wet lab (Ming-Wan, Kate)

- **12.** New and Other Business
  - New Guest: BCCDC Lab Member
- **13.** Next Meeting: April 11, 2024
- **14.** Meeting Adjournment

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1. ROLL CALL						
Worker Representatives	Association	on/Union	Work Location	Present	Regrets	Absent
Susan Moore	Faculty		Prostate Centre - JBRC	☑		
Ming-Wan Su	Faculty		Research Pavilion	$\square$		
Yuan Jiang	M&P AAPS		Blusson Spinal Cord Centre		$\square$	
Eunice Li	Non Union Techn Research Assistar		OVCARE	✓		
Mitali Pandey	Non Union Techn Research Assistar		Prostate Centre - JBRC		Ø	
Danmei Liu	M&P - AAPS		Centre for Aging SMART – R.Ho			
Orson Moritz	Faculty		Eye Care Centre	$\square$		
Andee Biason	M&P - AAPS		UGME - Diamond Health Care Centre	$\square$		
Yu-Chi (Pat) Chiu (A)	Non Union Techn Research Assistar		MAF JBRC	✓		
Joanne Matsubara (A)	Faculty		Eye Care Centre			
Zackary Grant (A)	Non Union Techn Research Assistar		Blusson Spinal Cord Centre		$\square$	
Vivian Chung (A)	M&P - AAPS		Centre for Aging SMART – R.Ho			
Employer Represei	ntatives		Work Location	Present	Regrets	Absent
Karen Donaldson		Facilities and	Administration, VCHRI	$\square$		
Stephanie Smith		MAF JBRC		Ø		
Kate Orchard (A)		MAF JBRC			$\square$	
Resources/Gue	ests		Work Location	Present	Regrets	Absent
Mardi Henderson		SRS (FoM)		$\square$		
Madeline Leighton		SRS (FoM)		☑		
Tahereh Valadbeigy (Guest)		BCCDC		☑		

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DETERMINATION OF OLIORUM

See attached incident report:

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

a. A minimum of 4 members;		
b. Worker representatives (faculty and staff workers who do not exercise managerial fu	unctions) and employer repr	esentatives
(management workers who exercise managerial functions);		
c. At least half of the members must be worker representatives;		
Is there quorum for this meeting	Yes	No
* If quorum is not met, the meeting does not qualify as a monthly meeting. The monthly meeting will need to be	<u>✓</u>	
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)	
February JOHSC Minutes		
Move to adopt minutes. Moved by: Ming-Wan Su Seco	nded by: Stephanie S	Smith
Are the minutes approved?	Yes	No
The the minutes approved.		
4. ADDITIONAL AGENDA ITEMS & APPROVAL OF AGENDA		
NB: Perchloride testing- JBRC		
4 A. REVIEW ACTIONABLE ITEMS FROM LST MINUTES (if applicable)		
Place actionable items under Accident/Incident Investigation, Safety Inspections, Correspo	ondence, New Business etc.	as applicable and
assign proper item # for further discussion/action.		
☑ No actionable items noted		
	Yes	No
Is the agenda approved?	<b>☑</b>	
	<b>'</b>	
5 REVIEW NEW CAIRS REPORT OF ACCIDENTS/INCIDENTS:		

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"New Business" e.g. make note of trends etc. Any incident-specific items and follow up requests are to be listed below)

• Monthly Incident List & Statistical Summary Report (For any general CAIRS information that requires discussion or action, please record under



Item # (Use CAIRS Incident ID # and Incident Date)	Priority	Action Plan (Actions Taken/Need to be taken)	Assigned To	Follow up: Date Pending	Status
133948 (133947) 2024-01-16 to 2024-02-16	С	REFER TO BCCRC IP was a PHSA employee	N/A	N/A	С
133929 (133919) 2024-02-19	С	Animal Bite: Student was bitten by naïve mouse while transferring to a chamber for behavioral analysis. Student washed hands. The report labels mouse strain as aggressive. The committee observed all strains of mice can become irritated when handled awkwardly for a prolonged period of time.  Root cause: The way the mouse was inserted into the chamber is awkward due to the lid—the animal needs to be held in one hand while the other hand lifts the lid and removes two circular stoppers to prevent the animal from jumping out.  Corrective actions: New modified chamber have been implemented which have no stoppers, resulting in a smoother and faster transition for the animal and less handling.  Action: Mardi to remove "aggressive" from report. All corrective actions complete	Mardi	N/A	С
133913 (133776) 2023-09-05	С	Needlestick: Student received needlestick while reloading suture into needle driver. This report is from September 2023 as it was reported to WorkSafeBC but not CAIRS.  Root cause: Person is developing skills in the OR.  Corrective actions: Supervisor reviewed over actions with fellow in room. Mardi has provided student with resources on how to appropriately report incidents through CAIRS.  Investigation Complete. No further action required	Mardi	N/A	С
133882 (133867) 2024-02-13	С	Sharp Contact: OT Student received minor scratch on forearm while using a small screwdriver to separate Velcro from a splint and tool slipped. Report is missing investigation details and corrective actions.  Action: Mardi to follow up with supervisor to gather more information	Mardi	4/11/24	IP
133752 (133695) 2024-01-18	С	REFER TO BCCRC	N/A	N/A	С

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133971 (133957) 2024-02-26	С	Animal Bite: Mouse bit student's finger while the student was correctly handling the animal and feeling under its fur for hair loss. Student washed their hands and returned to normal work duties.  Corrective Action: Different handling techniques and restraint devices were reviewed with student as options in the future.  No further follow up required	N/A	N/A	С
133965 2024-02-26	С	Overexertion: Employee experience sudden onset wrist pain while scooping animal food into bowls. Ergonomic team consulted before worker continues with that task.  Action- Steph to follow up with employee and submit supervisor report, confirm whether classification should be medical treatment or incident only. Mardi to fix dates on report as 2028 is listed	Steph/ Mardi	4/11/24	IP
133963 (133962) 2024-02-26	С	Needlestick: IP was drawing fluids into bag and received needlestick in their thumb. Committee noted Animal Workers has useful video as resource. Individual is not a UBC employee but works for 3 <sup>rd</sup> Party who use the animal care facility. Mardi noted UBC can review corrective actions but individual will need to be recategorized to a visitor report.  Root cause: Needle was inserted on an angle resulting in it going through the tubing – Supervisor reviewed techniques with worker.  Action: Mardi to change individual to 'visitor' on CAIRS report	Mardi	N/A	С
133904 2024-02-14	С	Bodily Reaction: Another event involving fumes entering AC facility during generator testing. Previous corrective actions including communication of date and time of testing prior to occurring were not followed. Mardi and Karen have since spoken to VGH reiterating importance of prior notice. Facilities have completed the corrective action to add a dampener to the air intake to attempt to get clean air from a different area. Facilities to do air exchange testing to ensure changes have not drifted from the CCAC requirements.  Action: Karen to confirm when air exchange confirmation is complete.	Karen	4/11/24	IP
133883 2024-02-14	С	Bodily Reaction: See above report 133904	Karen	4/11/24	IP
133854 (133646) 2024-01-15 to 2024-01-05	С	<u>Bodily Reaction:</u> Worker experienced skin irritation and mild respiratory reaction while handling hay in the rabbit housing area. Dander and fur of the animal in addition to wood chip shavings used for housing create common allergies. PPE is provided to staff, worker was not wearing PPE.	Steph	4/11/24	С

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133853 (133721) 2024-01-23	С	The committee discussed both the employer's responsibility to provide PPE and ensure PPE is fit-tested, as well as the worker's responsibility to wear PPE as directed by safe work procedures.  Root cause: Worker was not wearing required PPE.  Corrective actions: Worker is getting fit tested for a new respirator that may work better for them. Reviewed importance of PPE and reason for suppling with staff member individually and all staff. A new type of contact bedding has been purchased which produces less dust. Worker had appointment with OPH to discuss any potential issues for being able to comply with PPE requirements.  No futher action for JOHSC.  Caught in/under: Final incident report—report was reviewed last month, see February minutes	N/A	N/A	С
133833 (133812) 2024-02-05	С	Animal Bite: Worker was performing a cage change, while moving mouse between cages was bitten on the finger. Hands were washed, polysporin applied and returned to work. Mouse was naïve and moved with correct technique.  Corrective actions: Tube handling technique was reviewed with worker as an alternative to cupping technique  All corrective actions complete	N/A	N/A	С
134003 2024-02-28	В	Chemical spill:  Worker was attaching flow key to bottle of isoflurane in preparation to put into vaporizer to use as anesthetic during surgery. Worker did not attach flow key correctly as notches were not lined up and therefore not fully screwed onto bottle causing liquid to leak out. Worker stopped immediately when they noticed liquid had leaked. Worker had severe reaction to isoflurane exposure; normal reaction includes headache and nausea, worker experienced confusion and lethargy. First aid was called and attended, worker declined to go to ER. Worker was moved to another room to sit down and was supervised by two staff members.  Additional details:  Approx. 12 other people in the room and none were affected. Unclear why the first aid attendant didn't escalate the situation to 911. Committee discussed the benefits of calling 911 if someone is having an adverse reaction at work. In the event the person still refuses to be treated by 911, then a conversation can be had between emergency personnel and IP. A number of safety precautions are already in place and workers are trained how to fill vaporizer.	Mardi/ Steph	4/11/24	IP

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		Supervisor notes that filling vaporizers is not a task done alone so another person is always in the room. Pat asked if using and operating anesthetic machines and filling isoflurane should be a task that should not be done alone. Mardi agreed it would be worth reviewing.  Root cause: User error—the flow key was not attached properly causing liquid to leak out. Worker may also have high sensitivity to this compound.  Corrective actions: Conversation is required between worker and OPH, because there is possibility of re-exposure due to nature of work.  • All staff have been given a demonstration of the process of filling the isoflurane liquid.  • SOPs were reviewed and decision has been made to add specific step by step instruction to fill vaporizer.  • Flow key was reviewed to check for worn gasket which prevents leaking, was found in normal working order. Flow keys are regularly checked.  Actions:  • Mardi to connect with Pat for a site visit  • Steph to discuss with OPH whether other controls are required for this worker if there is a potential for a sensitivity to Isoflurane  • Worker recommended to contact OPH to determine necessary measures when working with this anesthetic as there may be sensitivities  • Steph/Pat to make additions to SOP to exclude Working Alone  • WSBC IR circulated to committee & posted in immediate work area, see IR #202417748025A			
INCIDENT/ACCIDE	ENT INVES	TIGATIONS WITH OPEN ACTIONS FROM PREVIOUS MEETING			
132456 2023-11-21	С	Contact with chemicals: Prechloric Acid found in chemical cabinet near a fume hood that does not have a self-washing function.  See Working with Perchloric Acid Safe Working Procedure (PDF). Susan to work with SRS to check whether the fume hood needs preventative cleaning.  Update 3/7: Testing has been completed; no cleaning is required.	Susan/ Mardi	N/A	С
133674 (133672) 2024-01-13	С	Faculty of Science Incident – Pipette Cut 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.  Root cause: Left-hand person working in a BSC set up for right-handed person resulting in awkward hand placement	Mitali	N/A	С

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		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.  Action: Pending final report from supervisor who is on medical leave Update 3/7: Final report was submitted and corrective action completed. No further action required			
133721 2024-01-23	С	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.  Root cause: Inexperience and not paying attention. Worker is newer and unaware of size of rack compared to doorway.  Corrective actions: Reviewed how to move racks with worker. Actions: Steph to complete supervisor's report  Update 3/7: report submitted (133853)- see CAIRS reports above	Steph	N/A	С
133757 2024-01-16	С	REPORT NOT SENT TO JOHSC  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 was unable to perform work or study tasks.  Root Cause: the student adjusted machine while under load (~30lb)  Other Factors that require Resolution:  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  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  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	Mardi	N/A	С

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submit a report as soon as an incident occurs. Actions: Mardi to report back to committee with investigation updates  Update 3/7: Mardi is in contact with PARC manager, operation manual has been updated. Mardi following up with other Faculties who send their students to FoM facilities for practicum/learning experiences to ensure Memorandums of Understandings are in place that outline coverage & emergency protocols.  No further action required from committee	
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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 review

☑ Inspections complete with no JOHSC follow up required: naming conventions listed below

☐ Inspections were delayed. Plan for rescheduling / follow up listed below

☐ Inspections require JOHSC action: listed below

☐ Reports were added to SharePoint

Link to Research Pavilion Schedule.

Item # (Use Inspection #)	Priority	Action Plan (Actions Taken/Need to be taken)	Assigned To	Follow up: Date Pending	Status
GI- APEL Biobank- 2023-10-05-02	С	Research Pavilion: APEL Lab and Biobank Scheduled for November 9 <sup>th</sup> Update 12/7: Report is being finalized, Karen to distribute. Update 1/11: Referred Forward Update 2/1: Karen to finalize report Update 3/7: Karen to finalize report	Joanne and Karen	4/11/24	IP
GI-Psychiatry- 2023-10-05-04	С	Psychiatry: 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	Karen	4/11/24	IP



6. REVIEW OF W safety of workers		E SAFETY INSPECTIONS (including any changes to equipment, machinery or we	ork processes tha	at may affect the h	ealth or
		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 <sup>rd</sup> floor wet lab that Ming-Wan is finishing with Kate  Update 3/7: Report is finished, Karen to send a copy to Madeline to post on SharePoint site.			
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 Update 2/1: Karen to go through with Mardi to check whether outstanding items are still relevant. Mardi to call Karen and set up a time to discuss Update 3/7: Onboard Stella's replacement to assist with outstanding corrective actions.	Mardi/Karen	4/11/24	IP
Upcoming Inspections	С	3 <sup>rd</sup> Floor Wet Lab Update 3/7: Ming-Wan and Kate- time for inspection has not been scheduled. Karen waiting for lab to first confirm their work bench as they are currently working across 3 and not the 1 assigned to them. Action: Karen to confirm time with Ming-Wan & Kate once update is received from lab	Karen/ Ming-Wan and Kate	4/11/24	RF
Inspection survey	E	Inspection Survey SRS released inspection survey for use in administrative areas. Closes 2 Feb. Mardi to provide summary on inspection survey findings at next meeting  Update 3/7: Inspection Survey Results: Response rate improved from last year—599 responses. Building coverage also improved to 60 from 38 last year. 49% of participants reported no issues requiring follow up. Doorways and walkways are generally kept clear and free from tripping hazards. Seismic restraints are needed, especially at hospital sites. Questions regarding First Aid information and evacuation procedures are similar to last year. Lots of participants expressed interest in joining a JOHSC or LST. Unclear if everyone	Mardi	N/A	С

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6. REVIEW OF W safety of workers		E SAFETY INSPECTIONS (including any changes to equipment, machinery or wo	ork processes th	at may affect the h	ealth or
		is receiving the same type of worksite orientation. Sit/stand desks are highly requested, but need to be assessed on case-by-case basis by the departments.			
Photomedicine Lab	С	Photomedicine Lab Inspection- Report sent to Madeline from Eunice Feb 2 <sup>nd</sup> . Committee is asked on the progress on following up on 'unknowns' identified in report. Karen confirmed herself, Joanne and Susan have checked spill kit. Evacuation points need updating—these are required for each lab  Action: Karen to update	Karen	4/11/24	IP
Road Safety Lab	С	Road Safety Lab- Eunice & Mitali Part of this lab is shared; small issues were identified such as removing boxes on the ground and replacing non-lab safe chairs. However this lab is in the same room as another lab that has larger issues that is not included in this inspection. Issues include flammable chemicals stored on the ground. Karen recommended only covering the Road Safety lab in this inspection and another required inspection will cover the other area of this room.  Action: Eunice and Mitali to complete inspection of specified area only	Eunice/ Mitali	4/11/24	IP

<sup>\*</sup> 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 (Actions Taken/Need to be taken)	Assigned To	Follow up: Date Pending	Status
ED-24/02/01-02	Е	Outstanding members for JOHSC Training: Andee and Steph Both have enrolled, completion TBC	Andee/ Steph	4/11/24	IP

<sup>\*</sup> ED – Education and Training



8. ONGOING BU	. ONGOING BUSINESS – Status of Action Items					
Original Item #	Priority	Action Plan (Actions Taken/Need to be taken)	Assigned To	Follow up: Date Pending	Status	
132237 (132164) and 132165 2023-09-21 132166 2023-10-05	В	Bodily Reaction: Staff experienced headache and nausea after exposure to diesel fumes. See "HS Report_Fumes Detected in JBRC"  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. VCC are planning to ban diesel 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. Testing is happening more frequently, and are being used early in the morning.  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.  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 Update 3/7: Update was done via CAIRS-see reports 133904 and 133883 in item 5	Mardi/ Karen	N/A	C	
NB-23-12-07-02	С	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 way to remove clutter from on top of the cabinets. Venting is also possible with double doors.	Karen/ Susan	03-07-24	ΙP	

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8. ONGOING BUS	SINESS —	Status of Action Items			
8. ONGOING BUS	SINESS —	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. Next disposal is scheduled for Feb 14.  Update 3/7: Site visit with Peggy schedule for March 26th. Karen/ Susan to provide update at next meeting			
NB-24/02/01-01	D	CO2 Cylinders when Elevators are down  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. Action: Karen to send building-wide email to communicate that people need their own plans on how to access CO2.  Update 3/7: Communication has been sent to those affected on site	ALL	N/A	С
NB-24/02/01-02	E	Mold in JBRC – Mold has been noted on ceiling and vents of 4 <sup>th</sup> floor of JBRC, affecting south end where Immunity and Infection research group grow mold. Complaints about black particles coming down through air vents, external contractor cleaned all the vents. 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. Actions: Karen to provide updates as they are available.  Update 3/7: Tests were completed in 3 areas- lab, hallway and cold room. No diffuser in Cold room, and one near entrance. Report showed very low detection and has been forwarded to SRS. Karen communicated that those affected in the room questioned the tests as it was not completed by microbiologists. Mardi confirmed UBC and VCH are required to get testing from an external contractors who use the correct testing procedures as regulated.	Karen	4/11/24	IP

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8.	3. ONGOING BUSINESS – Status of Action Items					
			Mardi offered to do a site visit if necessary and aid in the communication of the			
			report with those affected.			
			Action: Mardi and Karen to connect on next steps			

ltem #						
(use Recommendation or Report #)	Priority	Discussion and/or Action Items	Assigned To	Date of Issue	Date to be Completed	Status
IR #202416973017A	E	On February 2, 2024, a worker slipped at Perugia Café on campus, causing them to fall and strike their head. The worker received first aid on scene, and was then transported to a hospital for medical treatment	N/A	2/6/24	N/A	С
IR #202416973021A	E	This IR documents the receipt and acceptance of the employer's full Incident Investigation Report (EIIR), relating to an incident which occurred February 2	N/A	2/12/24	N/A	С
IR #202417748025A	В	This IR documents an incident at Jack Bell Research Centre on February 28, 2024. JBRC posted IR on H&S Notice board.	ALL	3/1/24	3/31/24	С

<sup>\*</sup> REC – Recommendation Letter \*IR – WorkSafeBC Regulatory Inspection

10. SAFETY & RISK	10. SAFETY & RISK SERVICES UPDATE						
Item # (SRS-yy/mm/dd)	Priority	Action Plan (Actions Taken/Need to be taken)	Assigned To	Date to be Completed	Status		
SRS-24-02-29	E	<ul> <li><u>Electrical Safety Website</u> SRS has website with resources for electrical safety. It was noted that charging electric scooters can be hazardous, and it is important to check any non-issued chargers fit Canadian standards. Committee could suggest a new policy about charging scooters/bikes.</li> <li>SRS General Inspection Updates. Requirements for Emergency Exit signs have been updated on the <u>General Inspection Template</u></li> <li>Daylight Savings starts March 10<sup>th</sup>—clocks go forward an hour. Take extra safety precautions in the days following</li> </ul>	ALL	N/A	С		



11. FACILITIES UP	11. FACILITIES UPDATES						
Original Item #	Priority	Action Plan (Actions Taken/Need to be taken)	Assigned To	Follow up: Date Pending	Status		
VCH-23/10/05-02	В	Fume hoods: Maintenance staff are working in mechanical areas to complete more repairs.  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 <sup>th</sup> however sink needs to be removed in order to get fume hood into room. Actions: Karen to facilitate plumbing an HVAC contractor to prepare for fumehood installation  Update 3/7: Fume hoods in Research Pavilion: fans now need to be added in addition to sink being removed. Karen is waiting on response from FMO on next steps. If a fume hood is needed please ask for access to Room 300 from Karen. Fume hoods in Jack Bell Rm 436: work is ongoing; a phoenix valve is needing replacement, however this would require a 3-day shutdown during the week to the lab. Karen waiting to hear what the impact would be to those affect before confirming work  Action: Karen to communicate with affected groups at JB Rm436. Provide updates when able	Karen	3/7/2024	IP		
VCH-23/10/05-04	В	Leaks: See previous minutes for background context.  Front façade & paving treatment:  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. Action: Karen/ Kate to provide updates as they are available.  Update 3/7: No more drilling has been completed, Karen still waiting to hear back from engineer. This will require future work, and intention is to do same type of tarring and stones to waterproof the area. FMO will try to reduce the smell of tarring entering the building but cannot be stopped entirely. Committee agreed communication to affected groups is key.  Action: Karen to provide updates as they are available.	Karen	4/11/2024	IP		

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11. FACILITIES UPDATES						
VCH-23/10/05-01	В	Elevators: JBRC elevator currently functioning between floors but cannot call from inside elevator. Karen has refrained from sending emails every time elevator starts/stops working. Issue with call button and panel inside cab which are awaiting new parts. Parts have been delayed.  A new VP of Research has been hired, who has been tasked with maintenance of infrastructure. Actions: Karen to provide updates as they are available.  Update 3/7: Karen bought repair person on site to reprogram elevator—Robert Ho elevator has been resolved  Action: Karen to follow up on JBRC passenger elevator	Karen	4/11/2024	ΙP	

## 12. NEW & OTHER BUSINESS

General discussion items (list actionable items below)
 Mold in ibro

Item # (NB-yy/mm/dd-01)	Priority	Action Plan (Actions Taken/Need to be taken)	Assigned To	Date to be Completed	Status
NB-24/3/7-01	E	Welcome to Tahereh from BCCDC. Tahereh is looking at their work schedule to confirm regular attendance at the JOHSC – once confirmed they can be formally onboarded. Tahereh also attends the BCCDC local lab safety meetings.	Mardi/ Tahereh	N/A	IP
NB-24/3/7-02	С	ICord Vivarium: Committee discussed worker's concerned when equipment was found running (potential for isoflurane or CO2 leak). Process should be to review the SRS to understand what the risk is. CAIRS can be used for 'near misses' so there are corrective actions documented.  Action: Mardi to follow up with Steph and Yuan.	Mardi/ Steph/ Yuan	4/11/24	IP
NB-24/3/7-03	С	Diesel Fumes: An anonymous complaint was filed with Metro Vancouver regarding the diesel fumes near the Research Pavilion. The estimated root cause is that the schedule that allows others to WFH on days the researchers run the engine was affected by the leap year. Schedule issue has now been rectified.  Actions: Metro Vancouver to do a site visit with Karen, Nick, and Carlsten lab members on March 13 <sup>th</sup> . A work order has been put in to check engine, replaced belts, check ducting is attached correctly. FMO have communicated	Karen	4/11/24	IP

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12. NEW & OTHER BUSINESS						
		the equipment belongs to the user and their responsibility is only to maintain. FMO are going to put maintenance of the equipment on their regular schedule, however committee is concerned this could be abandoned if/when FMO have a large amount of work orders. Karen has requested an SOP to check on roof regularly so controls around scheduling and preventative maintenance are documented.  Action: Karen to communicate to occupants of the Research Pavilion results of Metro Vancouver will site visit.				
NB-24/3/7-04	E	Air shutdown is scheduled for March 11-15 on Floors 3-5. Karen has communicated shutdown to rooms affected, portable air units have been arranged for people to use during the shutdown. Karen also noted BC Hydro do a shutdown every 3 years which is happening soon, and both JBRC and Robert Ho buildings will be affecting. She is making arrangements with maintenance to ensure there are enough portable air units to supply.	Karen	4/11/24	С	
NB-24/3/7-05	С	Eye care centre asked whether other units have changed their sharps containers to refillable rather than single-use containers. "refillable" containers are still removed by VCH custodial so they were unclear how they would get a new "empty" vessel ready for filling once their container had been removed. No other committee members have had their replaced but will ask their areas if they have seen new containers.  Actions: Committee members to report back regarding new sharps containers	Orson/ ALL	4/11/24	ΙP	

<sup>\*</sup>NB – New Business

13. NEXT I	13. NEXT MEETING					
Date:	April 11, 2024					
Time:	10:00 AM					
Location:	Zoom					

14. MEETING ADJOURNED			
Time:	11:30 AM		

### **LEGEND**

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PRIORITY:		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

Posting of Approved Meeting Minutes (Required):

• JBRC: IIRC – 4<sup>th</sup> floor & on-line

RHNH: 7<sup>th</sup> Floor
 ECC: Room 379

• Internal Communications Person

• Safety & Risk Services ubcsafety.committee@ubc.ca

• Posted on any Safety Bulletin Boards

• Skin Science (Dermatology): TBD

• RP: 1<sup>st</sup> floor mailroom 100

Blusson: Ground floor by deliveries

• JBRC: VPC – 5<sup>th</sup> Floor

• VGH SharePoint site

• VPC Common Drive (employees access only)