Workplace NL

MAIL FORM TO: 146-148 Forest Road P.O. Box 9000 St. John's Nt. A1A 3B8 FAX FORM TO: 709.778.1564

CALL US AT: telephone: 709.778.1552 toll-free: 1.800.563.9000 visit US AT: workplacenl.ca

Occupational Health & Safety Minutes Report Form (see instructions)

Date of Meeting (Y/M/D) 2020 / 03 / 0	5 WorkplaceNL Firm Number	94001 Site Number _	31	
PART I – Employer				
Employer (head office information)	Employer Representative(s)	Certification Training#	Present (Y/N)	
Company name: Memorial University	Co-chair: Barb Elliott	BAR6574987	Y	
Mailing address: 240 Prince Phillip Drive	Members: Andy Fisher	AND6091896	Y	
St. John's NL A1B 3X5	Dennis Cramm	DEN6348962		
CITY PROVINCE POSTAL CODE	Dennis Peters	DEN6670168	Υ	
Worksite street address:		_		
Total number of employees on site: 150		-		
Date of next meeting (Y/M/D): 2020 / 05 / 22	Worker Representative(s)	Certification Training #	Present (Y/N)	
Seasonal shut down date (Y/M/D)://	Co-chair: Ken Snelgrove	KEN6385503	Y	
	Members: Salim Ahmed	SAL7342011	Y	
OH&S minutes contact:	Lori Hogan	LOR7997931	Y	
Name: Lori Hogan	Mark Kieley	MAR7695386	Υ	
Telephone No.: 864-3711	Craig Mitchell	CRA7297659	Y	
Failure to complete this form in its entirety may delay minutes	Xianta Jiang	XIA7216858	N	
from being accepted and processed. Please ensure three	Guest(s)			
copies are made; one to post in the workplace, one for the OH&S committee's files, and one to send to WorkplaceNL.	Darrell Gosse			
Part II – OH&S Activity				
Since last meeting indicate the following:	From this meeting indica	ite the following:		
No. of workplace inspections conducted	No. of safety hazards identified 1			
No. of workplace complaints/concerns received	No. of health hazards identified 1		<u> </u>	
No. of incident reports reviewed	No. of outstanding items from last meeting			
No. of right to refuse work situations	Δ	5 —		
	Summary of Meeting on re	everse or Attached Docum	nent 🔘	
Both employer and worker co-chairs MUST SIGN AND DA and accurate.	TE the minutes when they agree the	hat the minutes are complete		
Employer Co-chair Signature:	Worker Co-chair Signa	ture:		
March 9, 2020 Date:	1	Date: March 9, 2020		

PART III - Summary of Meeting

Item Date	Item	Recommendation	Action By (who & when
Mar 5, 2020	Concrete Lab - Failure of researchers/students	Follow-up on correspondence with Dean (to be communicated with Department Head and faculty/staff involved) regarding establishing a plan of action and best practices surrounding concrete lab usage.	Who: KS
	to maintain safe working spaces while working	, part of detect and best practices sufficiently controller tablesage.	When: April 5
	or to return space to safe, clean conditions		
	when finished for day		
eb.20, 2020	Threat Incident in SJ Carew Building - many	Meeting planned with acting CRO to discuss "lessons tearned" regarding incident prepardness, protocols to follow, communications	Who: BE, KS and
	informal complaints and questions received and	and systems to activate.	others interested
	one written correspondence, regarding the		When: Mar 11,
	absent or conflicting messages from and		9am
	between RNC, CEP, MUN, FEAS, and faculty		
	+ students during the threat incident on Feb 18.		
	MUNSafe app notification was not received by		
İ	all and was sent an hour into police presence.		
	No follow-up communications after threat.		
}			