Minutes of Meeting
Joint Health and Safety Committee
Leslie Dan Faculty of Pharmacy (LDFP)
Tuesday, December 5 2017 @ 1:00 PM, Room PB 310

For Approval at Next JHSC Meeting

Present: Carolyn Cummins (M, Co-Chair); Zarko Zlicic (W, Co-Chair), Monika Mis (W), Sam D’Alfonso (W), Chesarahmia Dojo Soeandy (W), David Dubins (M), Jeff Henderson (M)

Regrets: Stephane Angers (E), Heather Boon (E), Jack Uetrecht (M), Ayoob Ghalami (E), Nina Marelli (W), Jack Uetrecht (M), Jessy Balendra (W), Donald Wong (W)

Absent: Ruth Carew (W), Paul Grootendorst (M), Ricky Tsai (W),

Chairperson for this meeting: Zarko Zlicic (W, Co-Chair)

W=Worker M=Management E=Ex officio

1. Approval of the minutes of June 27th 2017.
   No corrections noted and minutes approved.

2. Posting of inspection reports to USW website.
   • Minutes are posted on Faculty website and publicly available. Zarko will send the missing minutes to Donald for faculty website.
   • This is ongoing. Zarko will post them as they arrive.

3. Discuss access to database (EHS)
   • Requested that Sam have access to the training records as a second check from our end.
   • Geoff stated that this is not possible due to software constraints. Instead, Sam can obtain a list of trained people from EHS.

4. Freezers and sensors
   • Update from D. Dubins. Has made a relatively inexpensive (~$50) freezer sensor. It calls on two independent servers to try a fail-safe. Has wi-fi built in and will beep if disconnected from WiFi. Upon triggering, it can be programmed to call or to text a given phone number and will provide a private link to the current temperature of the freezer.
• Also developed a flood sensor – this is something that could be programmed to directly call 8-3000. A digital voice reports the problem and the location of the issue.
• Currently, one temperature monitor has been implemented in room 1219 and three flood monitors have been implemented in Bendayan’s main lab and other rooms.
• There are 19 freezers total and PIs should be made aware that these devices are available.
• Significant re-wiring was done on the 9th floor freezer room. Electricians are monitoring the voltage in the room.
• Currently there is no space in back up freezers due to having 3 freezers fail in the building. There is some delay in getting new freezers ordered and delivered.

5. Linoleum mats
• Zarko has priced out the cost of linoleum mats and C. Thomas (EHS) said that it is OK.
• This item has been currently put on hold due to a concern for a trip hazard. CAO office is currently investigating alternatives.

6. First aiders
• Donald has found that there is currently only one person on the first aider list who is regularly in the building and has up-to-date training. Have not heard back.
• Titi and Nina will put out a request for volunteers to get trained
• The latches on the first aid kits have worn out and the kits no longer stay closed. These should be fully stocked and replaced.

7. Cold room organization
• In Sept 2016 there was a cold room failure on 10th floor- after PIs were notified it was determined that 60-70% of items were unclaimed.
• Zarko – will talk to the PIs and organize the room. Zarko is to give PIs a deadline to organize their items and any remaining, unclaimed items on that date will be disposed. Place an emergency contact notice on the door.
  - Most PIs prefer to be given designated bins for cold room storage
  - CAO said to use boxes

8. Ventilation issues
• Dr. Hampson noted that there are open spaces that are open between the labs that can cross-contaminate air between labs.
• EHS came to inspect the labs and the gap in the ceiling that connects the two adjacent labs. EHS did not deem this a problem.
• Any PIs wishing to have this blocked can request a service order to do so.
• Any issues similar to this (ie. burnt smells or exhaust) can be directed to 8-3000. They should be trained and have the information available to direct you to the proper resources
• This issue is currently being looked at by UofT engineers who are performing a building wide inspection – they noted deficiencies such as GI plugs, falling light fixtures etc.
9. Role of USW Multisite representation
   - Each bldg. is a workplace – new structure of HSC across campus. Want to ensure that all committees are functioning well. There are new Terms of Reference coming out.

10. Falling light fixtures
    - Work order sent out to fix falling light fixture.
    - Trades person who came to fill the order said he would place on order to replace the fallen light fixtures for aesthetic reasons.
    - Several light fixtures need to be inspected for a risk of falling. Two fixtures have now fallen in areas overhead of workspaces.
    - This will be addressed in a follow-up work order.
    - Building engineers are inspecting this and will file a report

11. WHMIS relabeling
    - WHMIS labels on hazardous chemicals are to be replaced by December 2018 to be compliant with new legislation.
    - It has been proposed that the entire label cannot be replaced. A compromise is to put a sticker of the new red diamond symbol to cover the old symbol.
    - Need more information (ie. whether this compromise will meet compliance or whether this is insufficient) prior to proceeding

12. Restrict access to new workers
    - Sam has noted that about 50% of new workers do not complete their online WHMIs and safety training within the first week.
    - He suggested that we make this training mandatory prior to giving them their keys. The committee voted and agreed.
    - Upon follow-up, we can not withhold access to new workers. Responsibility falls on the PI to ensure that their workers are trained in a timely fashion

13. Annual safety inspection teams
    - Zarko has arranged the inspection groups for this year and tentative months have been assigned.

14. Faculty of Pharmacy Bulletin Board Audit
    - The JHSC is being audited. All JHSC boards must be updated. Locations are (1) reception, (2) 10th floor (3) 6th floor. Donald will post paper copies of the minutes on these boards before Oct 2 2017
    - No feedback has been received. All boards were satisfactory and a few items were added by auditors.
17. Film Developer

- Copper pipe leading from dark room travels above D. Dubin’s lab on 8th floor. This pipe was found to be totally corroded and was replaced by PVC pipe. Several labs were asked about how they dispose of their developer and fixer chemicals and it was found that many labs were pouring their developer down the drain in the dark room. This is what is suspected to have lead to the corrosion. This also raises the question of whether the developer machine neutralizes the chemicals prior to dumping them.
- Discussed different options of disposing chemicals. These include (1) collect the chemicals in a waster bottle, apply waste label and put upstairs in chemical waste room in penthouse or (2) have a silver filter in the drain (3) have a reservoir that collects waste
- Moved forward with having a chemical waster collection bucket
- Protocols are in place and SOP have been updated

18. Improperly Disposed Plastics in Pharmacy Building

- Caretaking staff found full biohazard bags inside regular recycling. These items were improperly disposed of; biohazard bags should never be placed in regular garbage.
- There have also been several questions about disposal of plastics.
- Each lab appears to have different procedures and put plastics into different buckets including chemical waste pails, large orange uncontaminated plastic bins and yellow biohazard bins.
- During the lab inspections, we will include questions about plastics disposal and guide labs on how to dispose of their plastics to standardize across all labs.

19. Protocol for Emergency Calls

- There was an incident with a student having a non-life threatening episode; the staff was unsure about how to proceed. For future reference, can call 8-2222 for non-life threatening emergency or 911 if in doubt.

Adjourned at 2pm.