

# Joint Occupational Health and Safety Committee (JOHSC)

November 18, 2021, 1:00 – 2:30pm MT Location: Google Meet Meeting Minutes

#### In attendance:

Mark Friesen, AVP, Human Resources Dave McLean, Director, Marketing Robert Siklodi, Manager, EH&S

# Crystal Koch, VP, MRSA (Employee Co-chair)

D. Scharie Tavcer (MRFA representative)
Stephanie Zettel (MRFA representative)
Amy McCarthy (MRSA representative)
Claire Grant (Administrative Support)

# **Regrets:**

### Rachelle McGrath, Director, Wellness Services (Employer Co-chair)

M Helena Myllykoski (MRFA representative) Joe Frazao (MRSA representative)

### **APPROVAL OF AGENDA**

# **Additions to Agenda Invited**

There were no additional items added to the current agenda.

### Moved and seconded:

**THAT** the Agenda for the November 18, 2021 Joint Occupational Health and Safety Committee meeting be approved. *Motion carried by unanimous consent.* 

### **APPROVAL OF MEETING MINUTES**

#### Moved and seconded:

**THAT** the Minutes of the October 21, 2021 Joint Occupational Health and Safety Committee meeting be updated to reflect a neutral representation rather than individual names before sending to Jennifer Allore, OH&S Officer, Government of Alberta.

**Action Item:** Administrative support to review October 21, 2021 minutes and all previous minutes and update to this format.



#### **ONGOING BUSINESS:**

### 1. Review of Action Items

- 1.1. Confirmed that the employer added FOAP to the membership list in JOHSC Google Drive under the <u>Reference Material folder</u>.
- 1.2. The <u>Terms of Reference</u> document was reviewed along with comments and suggested edits. It was noted that once finalized, this would then go to Annalise Van Ham, Vice-President, Finance and Administration for final approval. A copy of the document with mark-ups to be retained in the files should this need to be referred to. It was agreed that a definitions section was required, especially as pertaining to the definition of a 'worker'. Document to be tabled to the next meeting allowing for further review.

**Action Item:** Terms of Reference to be further reviewed and brought forward to the next meeting for finalization.

1.3. It was confirmed that the current Employee Health and Safety Poster needed to be posted throughout the campus. Concern was raised regarding budget costs to print these posters, however management felt that this could be covered under the EH&S budget. Employer confirmed that there are dedicated safety boards located throughout campus where this poster can be placed and, in order to ensure full visibility, it was agreed that the poster also be sent to the Deans and Administrative Assistants for all departments for posting in their own areas.

**Action Item:** Employer (RS) will ensure the current poster is placed on all safety boards on campus and also (DM) that a copy of this updated poster is sent to all Deans and Administrative Assistants of all departments for posting in their kitchen area(s).

The Library is still experiencing concerns with violations of both the mask and physical distancing mandates despite extensive education being provided to the students. The most recent communication was the distribution of tent cards advising that no food is allowed in the library.

**Action Item:** Employer (RS) to provide additional tent cards to employees (AM).

Employee (CK) to contact Peter Davison to ask for an update to the status of non-academic student conduct incidents being applied to non-compliance masking cases in the library.

1.4. The employees raised the concern regarding the lack of plexiglass in order to reduce droplet spreading for front facing staff members who also experience high levels of public traffic. Specific requests for this plexiglass have been received and it was felt that surpassing the minimum in safety requirements should be the goal of the employer. It was also pointed out that the materials were available on campus resulting in no additional impact to budgetary figures.

The employer noted that the campus was in full compliance with all Alberta Health recommendations with their mask mandate, HVAC, social distancing and vaccination protocols in place and that adding the plexiglass would pose an issue in terms of air circulation.

As a consensus could not be agreed upon, a vote was taken with four (4) in favour of plexiglass and three (3) against resulting in a written request to be made on behalf of the employees.

**Action Item:** A formal recommendation for the provision of plexiglass for front facing staff in high traffic public areas to be sent to Annalise Van Ham , VP Finance and Administration.



# 2. Reports

The employer (RS) provided a review of all incidents that have been addressed during the period of October 21 – November 16, 2021 which can be seen in detail here.

### Reporting period: October 21 – November 16, 2021

Total number of incidents: 25

- 2 Hazardous conditions
- 17 Injury / illness or property / environmental damage
- 5 Close Calls
- 1 Hazardous Condition

Most incidents were minor in nature.

The first hazardous condition involved a complaint regarding inadequate exhaust in a welding bay in U100F despite several requests made to the supervisor. It was requested if this could be looked at. The second regarded a lack of plastic barrier at the front desk of Academic Advising Services. It is a high traffic area without any protection from individuals not complying with the mask policy.

Of the 5 close calls, 2 concerned fuel spills at the Springbank hangar. One of these involved a fuel check valve not being properly closed. The other was the result of a fuel drain being stuck open. The plane was brought outside, the valve closed and the spill cleaned up. During the EH&S investigation spill response training was noted as a deficiency. Spill response training has since taken place and a plan for regular training has been implemented.

Another close call involved an instance of dehydration during the Local Field school backpacking trip to Doctor Creek, BC. There were no lasting issues from this incident.

**Action Item:** For all future meetings, a copy of the current incident report will be provided ahead of time as part of the agenda package to enable all parties to be able to review prior to the meeting.

In addition to the incident reporting, management (RS) advised that since October 21, 2021 there have been a total of eight (8) positive Covid-19 cases, 2 staff members who were on campus 48 hours before becoming symptomatic; 3 students who were on campus 48 hours before becoming symptomatic and the remainder were not on campus. In all cases there was no transmission to others. There were also five (5) positive cases reported from students through rapid testing and zero cases for staff. To date approximately 9,000 rapid tests have been completed. The library continues to be an area of concern with students not complying with the current mandates and protocols. Both EH&S and security personnel are making walk-throughs to improve this situation.

### 3. Violence and Harassment incidents

Management confirmed that these incidents were reported during the month they were received. Management confirmed that every instance has been accurately reported with regards to JOHSC. It was noted that how this has been reported has been inconsistent in the past and, as a result, management created a spreadsheet which they will share with the committee to aid in transparency and consistency of this reporting.



**Action Item:** Management (MF) to share with the committee the new spreadsheet created for violence and harassment incidents.

3.1. It was agreed by both the employer and employees that violations of psychological safety are also a reportable incident and management confirmed that these incidents had also been reported upon. However, it was noted that due to the confidential nature of these incidents there were very different reporting methods used. These reports go directly to the AVP, Human Relations who is the only person to see them. From there, information is shared on a strictly need-to-know basis, limiting the confidential and highly sensitive information to those dealing directly with the situation. Therefore, while the actual reporting of the incident remains the same as defined under the Act, the information itself is disseminated in a very different manner. The employees agreed that this information should be kept confidential but wanted to ensure that they were being made aware of the number of incidents reported each month.

The employees expressed concern over the recent situation involving dr. linda manyguns particularly with regards to a lack of communication of the situation. dr. linda manyguns, phd joined the lowercase movement to reject the symbols of hierarchy wherever they are found and will not use capital letters except to acknowledge the Indigenous struggle for recognition. Since this announcement, dr. linda manyguns, phd has received thousands of derogatory emails, including death threats. The employees expressed concern not only for the safety of dr. linda manyguns, phd, but for all those working in her area and by extension, throughout the university. The employer advised that immediate steps were taken to ensure safety. Security was brought in straight away and ITS to ensure that the employee had the resources they needed. Steps taken included the removal of any indicators as to the location of dr. linda manyguns, phd and the installation of panic buttons in the office of Indigenization and decolonization. The employee confirmed that there was a robust review from multiple areas, including external ones, to ensure everyone's safety. Management advised that there may be instances such as this where communication would need to be kept to a need-to-know basis in order to ensure the safety of all those involved and especially where outside agencies were concerned (in this case the police investigation into hate crimes). With regards to the safety of those working close to dr. linda manyguns, phd and of all those on campus, the employer assured the employees that all appropriate measures had been taken and there was no cause for concern.

- 3.2. Discussion took place regarding the two forms currently available for reporting incidents, the "Workplace Violence and Harassment Incident Report Form" (Word version) and the "Injury / Incident Report Form" (Google document). An employee (ST) made the following suggestions to update the Injury / Incident Report Form:
  - a) Increase the amount of space under Incident Description
  - b) Add a note to say that if additional space is required then a page can be attached
  - c) A link to be provided to the Workplace Violence and Harassment Incident Report Form

In addition, the employees noted that there was a need to come up with a better communication strategy as to the location of these forms and how they should be used. Communication on these forms has not been good.



**Action Item:** Management (MF) to take up adjustments to the Injury / Incident Report Form as per the employee (ST) suggestion. Both employer and employees come up with ideas for a communications strategy with regards to these forms.

An employee (CK) inquired about the new position of Feden Abeda, Safe Disclosure Advisor. The employer advised that both staff and students could go to Feden with any concerns they had and be assured of a safe place to disclose their issue. Feden would then advise the best action for the individual to take and provide them with the required resources. These discussions would not be captured in the reporting statistics due to their confidential nature and also that Feden would only be acting as a facilitator to provide guidance with regards to who to report to and how to make a report.

An employee (KC) asked if a survey should be undertaken to engage employees with regards to their health and wellbeing. The <u>Guarding Minds at Work</u> was suggested. They noted that prior to Covid-19 there was The Working Mind that came out from Wellness. However, with the emergence of Covid-19 such engagement had been lost. It was noted that the feedback from the MRSA PD days was how great it was to have speakers for mental health and wellbeing and how this pointed to the need to once again try and engage employees in services that spoke to this.

**Action Item:** Employer to review the survey tool and report back to the committee if it is appropriate or if another survey can be used.

# 4. Snow removal on campus

Concern was expressed by the employees that, due to cutbacks in personnel, there would be insufficient snow removal on campus. The employer agreed to set up a meeting time in the future for JOHSC members to physically inspect the snow removal.

**Action Item:** The employer (RS) sends out an invite to all JOHSC members to physically view snow removal on campus.

### 5. W wing construction

Details of the construction have now been reported to the community and the EH&S policy has recently been updated. The employees expressed concern regarding the asbestos in the W wing and how this was being handled. The employer confirmed that two outside professional firms would be handling the asbestos abatement. Everything would be bagged and removed and a clean air company would come in to do air quality testing. The employees requested if the employer (RS) could come speak to this at an MRSA Coffee Chat. Will also look at providing something similar for the MRFA. It was noted that there is a procedure under EH&S for asbestos removal but not an actual policy. The employees noted that at the end of the EH&S policy it made reference to an asbestos policy however none was in place. The employer (RS) will look into this.

**Action Item:** The employer (RS) to speak at an MRSA Coffee Chat about the asbestos removal and something similar to be set up for the MRFA. The employer (RS) will also investigate the lack of an asbestos removal policy.



# 6. Workplace policies

It was noted that there are a number of workplace policies that are overdue for review and it was agreed that these be divided up among the members for review and to be brought back to the committee. Grant's video has been posted in the JOHSC folder.

- 6.1 The employees requested that a formal request be made to have Amy Nixon, General Counsel and University Secretary and her new hire to join the January JOHSC meeting in order to share the policy review and approval process. This was supported by the employer.
- 6.2 It was agreed to table to the next meeting the discussion of inviting Jennifer Allore, OH&S Officer, Government of Alberta to speak to the new Act.

**SUMMARY OF ACTION ITEMS** - Go here for the latest update.