1. **Attending**

   Derrick Van Kirk or Niyousha Rahimi, AA  
   Colleen Irvin or Robbie Wong, BioE  
   Rachel Strickman or Ted Hanson, CEE  
   Michael Pomfret, CEI  
   Kameron Harmon or Benjamin Rutz, ChemE  
   Michael Glidden, CoE DO  
   Alexander Lefort or Selest Nashef, CSE  
   Tai Chen, ECE  
   Sonia Honeydew or Erin McKeown, EH&S  
   Sarah Coppola or Stacia Green, HCDE  
   Sheila Prusa or Kelly Foong, ISE  
   Bill Kuykendall, ME  
   John Young or M. Weaver, MolES/NanoES  
   Tatyana Galenko or Hanson Fong, MSE  
   N. Shane Patrick or Maria Huffman, WNF

2. **Previous Meeting Minutes**

   • March 2022 – approve? Corrections/additions?  
   • Minutes posted at [https://www.engr.washington.edu/mycoe/safety](https://www.engr.washington.edu/mycoe/safety) and safety boards.

3. **Department Incident Reports (use “5 Why’s” analysis for one report)**

   • All OARS reports may also be found on Tableau while on the UW network via this link: [https://bitools.uw.edu/#/site/Transitional/projects/573](https://bitools.uw.edu/#/site/Transitional/projects/573).  
   • ME @ Wilcox Hall (#2021-12-002) – Spill of bovine blood.  
   • CEE @ Benjamin Hall (#2022-02-012) – Accidental needlestick with needle used for N2 gas prep.  
   • MSE @ Mueller Hall (#2022-03-004) – Clean needlestick to student’s thumb when uncappping fresh needle.  
   • MSE @ Mueller Hall (#2022-03-015) – While cleaning a cast aluminum part, student poked (cut) their finger with a tool.  
   • ECE @ Magnuson (#2022-03-017) – Upon exiting animal facility, employee found scratch on finger. Gloves already disposed of, so treated as potential macaque exposure.  
   • WNF @ Fluke Hall (#2022-03-021) – Student employee dropped bagged bottle of methylene chloride in chemical bunker and alerted EH&S to spill. No splash to employee.  
   • CoE @ McMahon Hall (#2022-03-026) – SARP team (registered student organization, RSO) stored unapproved combustible materials without notification and manufactured rocket fuel candy in prohibited locations.  
   • CoE Deans Office @ McCarty Hall (#2022-03-036) – Student employee paused, but did not lock, embroidery machine and when the machine moved needle it pierced employee’s finger.  
   • WNF @ Fluke Hall (#2022-03-045) – During routine maintenance, employee discovered UV lamp housing overheating because cooling fan failed.  
   • HCDE @ Sieg Building (#2022-03-051) – Employee slipped on uneven, moss-covered ground surface outside Sieg Building.

4. **Group Business**

   • Review of the Group 9 Charter.  
   • Review of the UW Accident Prevention Plan.  
   • Discuss University COVID-19 Prevention Report Card.  
   • Potential speakers for May meeting: Invite Sarah Coppola to speak on her experience with Occupational Health? Any particular topics of interest?

5. **UW-Wide Meeting**

   • March meeting minutes attached.  
   • April agenda attached. Meeting highlights will be presented by Alex Lefort:
COVID-19 Updates:
- Increase in cases as expected for start of spring quarter & appearance of BA.2 variant, fewer restrictions, and more travel.
- Community level is still considered low, though may go up to medium if increases continue.
- Majority of cases are reporting mild symptoms or less.
- Changes to the UW COVID-19 Prevention Plan:
  - Site-specific plans now optional; the UW-wide plan covers most circumstances. EH&S may recommend site-specific for certain circumstances.
  - Face masks still required in specific locations: medical, public transit, animal facilities, etc.
  - Masks still recommended starting April 9th, down from heavily recommended for the first two weeks of the quarter.
  - With current increases, mask policies may change.
  - Still waiting for L&I to publish worker regulations requirements.
  - When talking to others about masks,
    1. You can: Encourage to wear masks and remind them of the benefits.
    2. You cannot: Insist/require that they wear a mask or that they leave if they are not, nor can you refuse service.
- Vaccine requirements do not include boosters currently.
- EH&S archived several documents that are now outdated/not required.
- Updates based on regulatory guidelines (CDC, WA L&I, DOH, county & state)
- COVID-19 Public Health Requirements & Guidance flow chart has been updated.
- Seattleflu.org has a great chart on what pathogens are going around and in what levels.
- 2021 OSHA Injuries Statistics:
  - Total number of injuries has gone up from 2020, but still lower than 2019. Percentage of recordable vs non-recordable stayed the same.
  - CoE quite low in percentage of injuries at the UW.
  - Top injury types were: sprains, strains, pulls.
  - Ergonomic injuries deep-dive:
    - Ergonomic injuries have mostly been to back and shoulders, with hands and wrist at 3rd.
    - In working to prevent these, UW has contracted with Ergo-Fit.
    - Contract started in 2018 and 76 self-assessments have been completed since with 44 high risk case reviews.
- Accident prevention efforts:
  - Held lab safety awards promoting lab safety ingenuity.
  - New MyChem database and lab caution signs.
  - New training course on Five-Whys Root Cause Analysis
  - EH&S reminds everyone to report all incidents: Look for unsafe conditions, unsafe acts, etc., and report.
  - On-time reporting (within 24 hours of incident) was below the goal of 70% of all reports.
  - Near-miss reporting was below the goal of 10% of all reports.
- UW Bothell has an EH&S position open.
• EH&S has a shop safety program manager position open, as well as a fire safety position open.
• EH&S is revising their lock-out tag-out (LOTO) training and manual.

6. **Member Updates**

   *Next Meeting: May 25th, at 1:30 PM, via Zoom*
Meeting Date: March 23rd, 2022 (via Zoom)

Attended

Carter Beamish, AA  Selest Nashef, CSE
Colleen Irvin, BioE  Denise Binder, EH&S
Rachel Strickman, CEE  Sarah Coppola, HCDE
Michael Pomfret, CEI  Sheila Prusa, ISE
Kameron Harmon, ChemE  John Young, MolES/NanoES
Michael Glidden, CoE DO  Tatyana Galenko, MSE
Alexander Lefort, CSE  N. Shane Patrick, WNF

Absent

Bob Hu, ME  May Lim, ECE

Previous Meeting Minutes

- February 2022 – minutes approved as is.
- Previous meeting minutes are at: https://www.engr.washington.edu/mycoe/safety#. EH&S recommends each department/group post paper copies on their safety board and inform employees of the name of their rep.

Incident Reports

- ME (#2021-12-002) – No representative for ME was present. This incident has been tabled to next meeting.
- WNF @ Wilcox Hall (#2022-02-002) – An improperly seated cap caused other built-in safety systems to fail resulting in the solvent overflow. Other instituted safety features controlled the accident, such as the secondary containment. This is primarily a lapse in procedure and re-training on properly sealing carboys has gone out. Michael Glidden asked if this would be better classified as a spill/release. Denise stated this is a shortfall of OARS of which they are aware. Currently, they are unable to classify incidents separately as a spill/release. This incident has been closed.
DRAFT Meeting Minutes

Health and Safety Committee for Group 9 (College of Engineering)

- **CEE @ Benjamin Hall (#2022-02-012)** – Rachel has not yet heard from the PI despite several attempts to contact. Alex asked for clarification on if it is fine to close a report without hearing from the group in question. Denise stated that this is fine in the event that an incident is straight-forward and it seems the corrections were sufficient. However, Alex, Colleen, and several others noted that double-gloving doesn’t seem a proper solution. Denise is in contact with EH&S’s needle safety expert; Any needle stick must be investigated further in depth, even if not contaminated. There are other physical supports that can be used to handle these hazards, such as retractable needles or physical needle manipulating devices that keep hands clear. Rachel stated that retractable needles would be useful. Alex will connect Rachel and Denise after the meeting to discuss where to procure these. This report is tabled to next meeting to ensure the lab is aware of our recommendations and has confirmed appropriate changes.

- **WNF @ Fluke Hall (#2022-02-019)** – The smell came from a small vending alcove upstairs from the affected person and impacted an area within 30 feet of the receptionist desks on the floor below. The lab was unaffected as the doors closed tightly. Shane stated they are still unsure as to what caused the smell. No person or food was found when investigating the area. There is nothing in the upstairs makerspace that would have caused this smell and, though some of Fluke’s gases can have a similar smell, none of the gas sensors were tripped. These sensors are certified annually (last time in November) and give an active reading of PPM/PPB. Shane has connected with indoor air quality specialists at EH&S for further exploration of the causes and on mitigations. This incident report has been closed.

- **CSE @ Gates Center (#2022-02-028)** – Selest stated that the user was attempting to cut through packing material too quickly and ended up slipping, cutting their finger. Cleaning out the wound and applying an adhesive bandage was sufficient. The group asked Selest if this was a proper use of scissors and whether another tool may have been better. Selest stated that no, this was the proper tool for the job and also noted that they are trained to cut away from themselves. Alex asked if it would be helpful to upload an info sheet on proper cutting tool selection to the Group 9 shared folder just in case. Selest and several others agreed that this would be useful. Alex will upload this sheet shortly. This incident report has been closed.

**Group Business**

- Steven Charvat, the director of Emergency Management, presented on earthquakes and earthquake safety at the UW.
  - Slides were shared with the group afterward and will be available in the shared folder. Alex asked that any questions for Steve may be emailed to Alex and can be forwarded to Steve to ensure any answers are shared with the rest of the group.
DRAFT Meeting Minutes

Health and Safety Committee for Group 9 (College of Engineering)

- Review of the Group 9 Charter
  - Due to the presentation overrunning on time, the group voted to delay the review of the Group 9 Charter to next meeting.
- The group will review the UW Accident prevention Plan in the April meeting.
  - Please read over the APP and submit any potential changes to Alex or prepare to share by the next meeting.
- Potential Speakers?
  - The group will forego a speaker for the April meeting to make additional time for both the Group 9 Charter review and UW APP review.

UW-Wide Meeting

- Alex shared updates from the UW-Wide meeting:
  - COVID-19 Updates:
    - UW is in a transition state. Lots of info to come.
    - Fall of cases has slowed due to Omicron BA.2 variant, though still falling.
    - There is a decrease in people getting tested, but also a decrease in rates of positive cases with a 2.4% positivity rate.
    - Many counties, including King, are lifting mask mandates to align with state guidelines.
    - UW will keep mandates until end of quarter to avoid hurdles in transition. As of March 28th, masks will be optional in most areas outside of public transportation, health care settings, and certain other locations.
    - UW still heavily recommends masks for the first two weeks of quarter.
    - Afterward, though optional, UW still encourages people to wear masks, especially for the benefit of those more vulnerable.
    - Units are unable to require masks unless the tasks in the space would normally require them.
    - The vaccination mandate is still in place and those who are unvaccinated must still wear at least a surgical mask and must be tested at least once/week. Additional updates may come.
    - EH&S hopes to update all guidance/FAQs by March 28th.
    - There are frustrations from some faculty and instructors to which EH&S stated that the decisions were made after consulting a broad number of groups on campus. They recognize that there are anxieties around these changes and recommend that those concerned should upgrade to or continue wearing high-grade masks.
    - Requirements may change as cases are monitored.
    - Some eating locations will still be off-limits.
    - Guidelines around accommodations for students off-site and remoting in, particularly for those who are immunocompromised, are still in the works.
    - CDC guidance now based on community risk levels, which are influenced by: case rates, hospitalizations, hospital bed capacity.
    - Masking is now only required in “high risk” locations. Contact tracing is now also focused primarily on “high risk” locations, though no changes happening to the UW contact tracing currently. To be re-evaluated at the end of spring.
DRAFT Meeting Minutes
Health and Safety Committee for Group 9 (College of Engineering)

- WA L&I is making broad changes to workplace COVID requirements, relaxing some for employers with vaccine mandates. The UW will evaluate and update as needed when changes occur.
- COVID-19 Contact Scenario Flow-Chart has a few updates, though most has stayed the same.
  - Barry Morgan spoke on Business, Academic & Research Continuity (BARC) Plans on behalf of Emergency Management.
    - 56% of departments do not have one, though they are required via APS 13.2.
    - An additional 200 estimated plans are less than 25% complete.
    - The UW creates and stores BARC plans on Husky Ready software. Very good at allowing first-time creators to easily build their plans.
    - Coming out of the pandemic, this is a great time to create or update your plans, as many plans have also gone untouched for over two years.
    - There is now a training for Intro to BARC, as well as a part II coming up.
    - There are many community resources available for creating your plans, as well.
    - Slides are available. Alex will post these in the Group 9 shared folder.
  - EH&S is reviewing and preparing again for radiation emergencies.
  - EH&S shared updates to their strategic plan for achieving a culture of safety. Slides available upon request.
  - A new EH&S Committee Member Training is launching. A notice will go out shortly.

Department Updates

- AA – Carter stated they are going over FSEPs and updating them. They are running into issues finding evacuation wardens for every floor, as not all of them have occupant offices. They are also extending wardenship to students and post-docs.
- BioE – Colleen mentioned they have had recent difficulties with MyChem: When running area/zone reports, the data is not always fully true. They have had several false positives for over-limit counts. UW-IT has been able to fix these relatively easily, but it is a good idea to double check these reports with your actual inventory reports. Units matter.
- EH&S – COVID updates: Denise stated that EH&S hopes to finish and post face covering policies by end of day Thursday, 3/24. Signage should be finished by end of day Friday, 3/25. UW Facilities is responsible for building postings. Language for unit signs and documents will also be posted on the UMAC site and will be linked on the EH&S COVID-19 page. EH&S is still waiting on whether masks will be labeled as “recommended” or “optional.” Michael Glidden stated a bit more information from CoE on this topic: CoE-specific wording should be sent out to faculty and staff directly shortly. Until then, look to your unit to see if they have anything available for you to post until CoE has more information.
DRAFT Meeting Minutes
Health and Safety Committee for Group 9 (College of Engineering)

- HCDE – Sarah stated she submitted a near-miss into OARS regarding slippery, moss-covered surfaces outside of Sieg Building. She also asked whether an OARS report is feasible to submit on behalf of mental health/stress concerns or detriment to work due to the laxing of mandates for masking:
  - Denise responded that there is a reporting system on the EH&S website that one can send anonymous or non-anonymous reports for concern for which EH&S is not responsible; These reports are then forwarded to the respective authority. Denise shared this link to the report portal: https://www.ehs.washington.edu/report-concern
- MSE – Tatyana mentioned that this will be her last meeting on the committee for a while; She will be on maternity leave. We wish you and yours well! There were several more break-ins at More Hall. A professor showed interest in installing cameras. They are in talks with UWPD but are interested in hearing more info from others in the committee who have experience with installing these. Alex will reach out with CSE’s experiences installing cameras. MSE also has two OARS reports incoming: A non-contaminated needle puncture and a poke from a sharp forceps tool. Both drew blood and first-aid was required.
- WNF – The local fire house has a new fire captain. Shane is working with Scott Nelson in getting them up to date with the building and facilities in Bowman. Shane also wanted to go on record that he is displeased with the UW not allowing units to control whether or not they are able to allow masks:
  - There is a lot of frustration on how units are shouldering the burden of cleaning and other mitigation methods, yet are unable to control other aspects that keep themselves and other safe.
  - Sarah added that high risk faculty and staff should be able to set masking policies in their own offices as well, to which Rachel agreed.
  - Michael Glidden has mentioned that he is also sharing this information further up the chain.
  - Sarah stated that those of us with lots of people contact should have been involved in the decisions to change masking policies.
  - Colleen agrees with this conversation on masking policy changes and the lack of listening by those who are setting the policies.
- Good of the Order:
Michael Glidden strongly encourages that you report through your various structures if you’re worried about the ongoing conversations around masking and safety. The University is more favorable to these individual reports and, with many of them, there is a greater chance they will listen and reassess these issues.

**Adjournment**

- Adjourned at 2:56 PM.

**Next Meeting**

- Next meeting will be April 27th, 2022 at 1:30 PM via Zoom.
Yesterday we removed the contents of a malfunctioning -80 C freezer. Among the contents were two dialyzers that were left in a crate on the floor overnight to thaw for disposal. We did not notice that their outlets were not capped. Overnight, bovine blood from the dialyzers spilled out onto the floor and nearby objects.

I noticed the spill around 10:15 am on the 1st of December but it likely occurred earlier. Following EHS standard operating procedure I am soaking the contaminated floor with 10% bleach for 30 minutes twice.

Contaminated objects will be disposed of as biohazardous, washed as lab glassware or soaked in bleach as appropriate for the object...

Supervisor
Dayong Gao
=+1 206 543-1411
dayong@uw.edu

Department: ENG: Mechanical Engineering
Classification
Property damage only

Type of Incident
Exposure to Potential Biohazardous (Infectious) Material

Injury Description
None

Body Parts Affected
None

Cause of Injury/Damage
Biohazardous Material, Infectious Agents

Slip/Trip/Fall Information

Suggested Corrective Actions by Affected Party

Ensure that dialyzers are not stored uncapped or cut.

Suggested Corrective Actions

Otherwise procedures were properly followed and hazard was contained.

Root Causes:
The Dialyzers were not sealed (capped) well before placing them into the -80C freezer.

Recommendations / Preventive Measures

Make sure that all Dialyzers must be capped well before freezing and put in a safe container during the thawing process.

EHS Comments

fed: Eleanor Wade, Judy Cashman, Zara Llewellyn, Tracy Harvey, Lesley Decker.
**Report Number:** 2022-02-012  
**Contact EH&S at:** 206-543-7262  
**Date Reported (mm/dd/yyyy):** 02/03/2022  
**Time Reported:** 01:44 PM  

### Person Reporting Incident

<table>
<thead>
<tr>
<th>Occupation / Position</th>
<th>Date Reported (mm/dd/yyyy):</th>
<th>Department: ENG: Civil and Environmental Engineering-Stahl Lab</th>
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### Person Involved or Affected

<table>
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<tr>
<th>Department: ENG: Civil and Environmental Engineering-Stahl Lab</th>
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### Incident Details

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<tr>
<th>Campus</th>
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<tr>
<td>Seattle</td>
<td>02/03/2022</td>
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<table>
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<th>Incident Location:</th>
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<tr>
<td>Rm 476</td>
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<table>
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<tr>
<th>Room</th>
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<tr>
<td>Stahl lab, Benjamin Hall</td>
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#### Incident Description:

- The sterile needle had been inserted into a non-sterile butyl rubber stopper situated on a crimp capped serum bottle. The needle had been used for N2 gas standard preparations. The N2 flow was OFF when the incident occurred. No active N2 gas flow was passing through the needle. The needle was getting picked up by my gloved left hand to be removed from the gas outlet. The needle penetrated the glove and the skin. The puncture wound was deep and it bled.

- The needle was not in contact with infectious material from any known source. But it was in contact with non-sterile surfaces (the butyl rubber stopper) and with N2 gas (which was passaged through a sterile filter).

---

### Supervisor

<table>
<thead>
<tr>
<th>Full Name:</th>
<th>David A Stahl</th>
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</thead>
<tbody>
<tr>
<td>Phone:</td>
<td>+1 206 685-6362</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:dastahl@uw.edu">dastahl@uw.edu</a></td>
</tr>
</tbody>
</table>

### Classification

- Injury requiring first aid

### Type of Incident

- Cut, Laceration, Puncture, Scratch, Abrasion (Open Wound)
- Finger(s)
- Needle/Scalpel/Medical Sharps (Clinical, Research, Teaching)

### Contributing Factors

- Inadequate Guards/Barriers

### Suggested Corrective Actions by Affected Party

- Use double gloves or instruments when removing needles from a gas outlet.

### Supervisor's Comments

- Brief lapse of attention to standard precautions when working with needles.

### Recommendations / Preventive Measures

- Discussed the importance of greater attention to activities where movement or transfer of needles creates greater risk. The employee will also now routinely double-glove when working with needles to reduce the risk of skin puncture.

### Other Comments:

- fwd: Judy Cashman, Lesley Decker, Zara Llewellyn.
Person Reporting Incident

<table>
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<tbody>
<tr>
<td>RESEARCH SCIENTIST/ENGINEER 3 (E S 8)</td>
<td>03/02/2022</td>
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Department: ENG: Materials Science and Engineering

Time Reported: 11:33 AM

Person Involved or Affected

| Department: ENG: Materials Science and Engineering |

Incident Details

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<td>03/02/2022</td>
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<table>
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<th>Location</th>
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<tr>
<td>MUELLER HALL</td>
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<th>Department</th>
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Incident Description:

Student was needed to use a needle for an experiment. After unpacking, student took off the cap and accidently poked right thumb. Needle was new, did not come in contact with anything prior to accident.

Supervisor

<table>
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<tr>
<th>Full Name: Unknown</th>
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<tr>
<th>Phone: Unknown</th>
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<tr>
<th>Email: <a href="mailto:injury@u.washington">injury@u.washington</a>.</th>
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Department:

Classification

Injury requiring first aid

Has Attachment(s)

Type of Incident

Injury Description (None, Yes) - Cut, Laceration, Puncture, Scratch, Abrasion (Open Wound)

Body Parts Affected (None, Yes) - Hands, Wrists

Cause of Injury/Damage, or Potential Injury/Damage - Needle/Scapel/Medical Sharps (Clinical, Research, Teaching)

Slip/Trip/Fall Information

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<th>Trip: None</th>
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<th>Fall From Same Level: None</th>
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<tr>
<th>Fall From Elevated Height: None</th>
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<th>Stairs: None</th>
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Contributing Factors

Equipment - None

Environment - None

Policies / Procedures - None

Human Factors: Other

Suggested Corrective Actions by Affected Party

| Suggested Corrective Actions: Other |

| Root Causes: |

| Recommendations / Preventive Measures: |

Other Comments:

fwd: Judy Cashman, Eleanor Wade, Lesley Decker, Zara Llewellyn.
**Person Reporting Incident**

- **Occupation / Position:** Research Scientist/Engineer 3 (E S 8)
- **Department:** ENG: Materials Science and Engineering
- **Date Reported:** 03/07/2022
- **Time Reported:** 10:20 AM

**Person Involved or Affected**

- **Department:** ENG: Materials Science and Engineering

**Incident Details**

- **Campus:** Seattle
- **Date of Incident:** 03/07/2022
- **Location:** MUELLER HALL
- **Time of Incident:** 10:15 AM
- **Room:** 176

**Incident Description:**

Student was trying to clean a casted aluminum part from plaster mold, poked left index finger with a tool, drew some blood.

**Supervisor**

- **Full Name:** Unknown
- **Phone:** Unknown
- **Occupation / Position:**
- **Email:** injury@uwashington...

**Classification**

- Injury requiring first aid

**Type of Incident**

- Injury Description (none, if no injury/exposure):
- Cut, Laceration, Puncture, Scratch, Abrasion (Open Wound)
- Body Parts Affected (none, if no injury/exposure):
- Fingers
- Cause of Injury / Damage, or Potential Injury / Damage:
- Needle/Scalpel/Medical Sharps (Clinical, Research, Teaching)

**Slip/Trip/Fall Information**

- Slip: None
- Trip: None
- Fall From Same Level: None
- Fall From Elevated Height: None
- Stairs: None

**Contributing Factors**

- Equipment: None
- Environment: None
- Policies / Procedures: None
- Human Factors: Rushing

**Suggested Corrective Actions by Affected Party**

- Suggested Corrective Actions: Other
- Do not rush, take your time and be extra careful when dealing with sharp tool.

**Supervisor’s Comments**

- Root Causes: 

**Other Comments:**

- Corrective Actions Target Date (mm/dd/yyyy): 
- Corrective Actions Complete Date (mm/dd/yyyy): 

**EH&S Comments**

- fwd: Brandon Kemplman, Brett Konza.
**Incident Details**

- **Campus**: Seattle
- **Date of Incident (mm/dd/yyyy)**: 03/04/2022
- **Location**: MAG H.S.C.I
- **Room**: 1081
- **Other**: 03/07/2022 01:19 PM

**Incident Description**: As the IP exited the animal facility she noted a scratch on her finger that she did not know where it came from. She could not check her gloves as she had already disposed of them. She washed for 15 minutes and came to see me. Had been working with animal, cleaning chairs and other activities.

**Supervisor**: Amy Orsborn
- **Full Name**: Amy Orsborn
- **Phone**: 206-616-2049
- **Email**: aorsborn@uw.edu
- **Department**: ENG: Electrical & Computer Engineering

**Classification**

- Injury requiring first aid

**Type of Incident**

- **Injury Description** (type, site, injury/exposure): Cut, Laceration, Puncture, Scratch, Abrasion (Open Wound)
- **Body Parts Affected** (note, no): Fingers
- **Cause of Injury** (damage, potential): Non-human Primates; Structures, Surfaces

**Slip/Trip/Fall Information**

- **Trip**: None
- **Fall From Same Level**: None
- **Fall From Elevated Height**: None
- **Stairs**: None

**Contributing Factors**

- **Equipment**: None
- **Environment**: None
- **Policies / Procedures**: None
- **Human Factors**: Inattention

**Suggested Corrective Actions by Affected Party**

- **Suggested Corrective Actions**: Other

**Supervisor’s Comments**

Examine hands more closely before disposing of PPE to check for any breakage in PPE to determine if exposure occurred.

**Root Causes**

- The primary cause of this minor incident resulting in full exposure protocol is not paying full attention when removing PPE. Minor scratches can occasionally occur that do not break the multiple layers of protective gloves, but confirming this requires checking the glove integrity prior to disposal. This step was skipped.

**Recommendations / Preventive Measures**

- Protocols for PPE removal will be amended to include checking skin integrity prior to disposing of gloves. All personnel will be informed of the updated policies.

**Other Comments**

- **Corrective Actions Target Date (mm/dd/yyyy)**: 03/11/2022
- **Corrective Actions Complete Date (mm/dd/yyyy)**: 03/11/2022

**EH&S Comments**

fed: Melinda Young, Eleanor Wade, Judy Cashman, Zara Llewellyn, Lesley Decker.
**University of Washington**  
**Accident / Incident Report**

**Report Number:** 2022-03-021  
**Contact EH&S at 206-543-7262**

### Person Reporting Incident

- **Occupation / Position:** UNDERGRADUATE RESEARCH ASSISTANT (NE H UAW ASE)  
- **ENG: Collaboration Core - WNF JM Student**  
- **03/09/2022 02:57 PM**

### Department

- **ENG: Collaboration Core - WNF JM Student**

### Person Involved or Affected

- **Occupation / Position:** ENG: Collaboration Core - WNF JM Student

### Incident Details

- **Date Reported:**
- **Time Reported:** 02:15 PM

- **Department:**

- **Time of Incident:** 02:15 PM

- **Incident Location:** FLUKE HALL

- **Room:** 136 Chemical Storage

- **Other:**

  > I was transporting one 1 liter glass bottle of Methylene Chloride in the Chemical Bunker from its storage shelf to the chemical cart to be transferred into the WNF clean room. This is a routine task and I was wearing nitrile gloves, a chemical apron, a face shield, and chemical gloves. On my way from the shelf to the cart, the bottle shifted in its plastic bag causing me to lose my grip. The bottle fell to the floor and forward from me, breaking as it hit the floor. It rolled for about 1 foot after impact and began spilling out of the bottle and bag immediately after impact, but to my knowledge no splashing or splattering occurred. No methylene chloride spilled on me, my clothing, or my PPE. I alerted the other student in the bunker and we both immediately left the room and went outside, propping the door open. There was extremely minimal if any inhalation before we had exited the room. We then contacted XXXXXXX and remained outside and called EH & S to alert them of the spill.

### Supervisor

- **Nicholas S Patrick**  
  - **Email:** patricns@uw.edu
  - **Phone:** +1 206 221-1045

### Classification

- **Property damage only**

### Type of Incident

- **Injury Description:** None
- **Body Parts Affected:** None
- **Cause of Injury/Damage:** Broken Glass, Splinter, Sharp Furniture Edge, etc.; Chemicals

### Slip/Trip/Fall Information

- **Slip:** None
- **Trip:** None
- **Fall From Same Level:** None
- **Fall From Elevated Height:** None
- **Stairs:** None

### Contributing Factors

- **Equipment:** None
- **Environment:** Chemicals
- **Policies / Procedures:** Failure to Follow Procedures
- **Human Factors:** Failure to Follow Established Protocol/Procedures

### Suggested Corrective Actions by Affected Party

- **Change/review work procedures**

### Supervisor’s Comments

**Root Causes:** Standard procedure for moving chemical bottles is that bottles should be supported by two hands, a cart, or an approved secondary container/carrier. Bottles in bags should never be supported by just the bag. Affected party did not follow this process.

**Recommendations / Preventive Measures:** Review proper procedures for moving chemical containers with affected party and colleagues. The employee’s own statements acknowledge better grip and carrying practices should have been used.

### Other Comments:

- ** correct actions target date:** 03/16/2022
- **correct actions complete date:** 03/16/2022

**EH&S Comments:**

> fed: Eleanor Wade, Tracy Harvey, Judy Cashman, Zara Llewellyn. Most of the liquid spilled into the room's grated berm. No one exposed.
NEAR MISS Report
RSO team SARP violated 2 user agreements in McMahon hall residential facility.
1. stored unapproved materials including highly combustible, and/or potentially explosive chemicals without
   proper notification with EH&S and Mychem departments at UW
2. facilitated unauthorized manufacturing exercises of rocket fuel candy in McMahon Hall RSO locations which is
   prohibited

Actions were recently discovered on or around March 4th. It is believed that activities in question began around Oct
15th of 2021.

Contributing Factors
Using Equipment Improperly; Improper Equipment
Inadequate Ventilation; Chemicals; Fire, Explosion
Failure to Follow Procedures; Appropriate Procedures Non-existent; Inadequate Instructions, Procedures;
Inadequate Planning, Preparation; Inadequate Support, Assistance
Inadequate Training; Failure to Follow Established Protocols/Procedures; Inattention

Suggested Corrective Actions by Affected Party
Provide safety training; Undertake hazard assessment; Change work area layout / design; Change/review
work procedures
Review and Audit RSO protocols and policies regarding storing and use of chemicals and other potential risks. Implement new
policy and oversight protocols.

Root Causes:
Primary root causes are lack of training and lack of adherence to stated policies and procedures by persons
involved. Supervision from RSO advisor was not sufficient or aligned with EH&S best practices.

Other Comments:
monitored by the A&A department chair. All team actions have been paused until appropriate locations and
approves are in place. New policies are being instituted in A&A to prevent purchasing of any chemicals
without providing a corresponding SOP and an approved location for where the material will be used. The RSO
has been informed of the need for correct SOPs, Lab Safety Manuals, etc. and is working on updated
documents. The A&A department has appropriate spaces for the work that was done in an inappropriate
location, and the team will be monitored for appropriate use of spaces. We are considering a policy where all
RSOs will have to apply annually to be sponsored by the department and provide supporting documents such
as safety history, team advisory board, and design review outcomes.
## Person Reporting Incident

<table>
<thead>
<tr>
<th>Occupation / Position</th>
<th>Date Reported (mm/dd/yyyy)</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONTINUING EDUCATION SPECIALIST (E S 7)</td>
<td>03/17/2022</td>
<td>ENG: Deans Office-Academic Affairs</td>
</tr>
</tbody>
</table>

## Person Involved or Affected

<table>
<thead>
<tr>
<th>Department</th>
<th>Date Reported (mm/dd/yyyy)</th>
<th>Time Reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENG: Deans Office-Academic Affairs</td>
<td>03/17/2022</td>
<td>12:27 PM</td>
</tr>
</tbody>
</table>

## Incident Details

<table>
<thead>
<tr>
<th>Campus</th>
<th>Date of Incident (mm/dd/yyyy)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seattle</td>
<td>02/28/2022</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Incident Location</th>
<th>Time of Incident</th>
</tr>
</thead>
<tbody>
<tr>
<td>McCarty Hall B47</td>
<td>07:00 PM</td>
</tr>
</tbody>
</table>

Other:

- XXXXXXX was working on the embroidery machine and it was tearing through the fabric they were supposed to be embroidering. XXXXXXX paused the machine and went to remove the embroidery hoop from the machine. As he reached for the hoop, the embroidery machine said "Improper needle position" and moved the needle into its original position, which was where XXXXXXX's left middle finger was. Part of the needle became lodged in XXXXXXX's finger.

## Supervisor

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deianeira L Caudle</td>
<td>+1 206 543-6393</td>
<td><a href="mailto:cauldld@uw.edu">cauldld@uw.edu</a></td>
</tr>
</tbody>
</table>

## Classification

<table>
<thead>
<tr>
<th>Injury requiring medical treatment (go to level 3 if in-patient hospitalization or amputation occurred)</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
</tr>
</tbody>
</table>

## Type of Incident

<table>
<thead>
<tr>
<th>Injury Description (none, Fio)</th>
<th>Body Parts Affected (none, Fio)</th>
<th>Cause of Injury/ Damage, or Potential Injury/Damage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cut, Laceration, Puncture, Scratch, Abrasion (Open Wound)</td>
<td>Fingers</td>
<td>Struck or Pinched by Moving Object</td>
</tr>
</tbody>
</table>

## Contributing Factors

<table>
<thead>
<tr>
<th>Equipment</th>
<th>Environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>Sharp Objects</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Policies / Procedures</th>
<th>Human Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Failure to Follow Procedures</td>
<td>Failure to Follow Established Protocol/Procedures; Inattention</td>
</tr>
</tbody>
</table>

## Suggested Corrective Actions by Affected Party

<table>
<thead>
<tr>
<th>Suggested Corrective Actions</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>NA Remember to lock the machine even when paused.</td>
<td></td>
</tr>
</tbody>
</table>

## Supervisor's Comments

The incident was caused by lack of attention paid by the student worker, XXXXXXX. He failed to follow proper procedure that is documented in the SOP and from the safety training that is given to all people in the space. Our training and the SOP direct students to never place extremities in a space where equipment may move unexpectedly, especially when the equipment in question is sharp.

We will add additional signage around the machine reminding users to keep all extremities clear of moving parts and highlight that area on the SOP that is posted near the machine.

## EH&S Comments

- Brandon Kemperman, Brett Konzek.
While performing routine maintenance on a UV contact aligner, employee noticed the housing for the UV lamp was far hotter than normal. On accessing the lamp, employee noticed the cooling fan was not running, though it started to run again when touched. Once the area had cooled, employee removed the bulb and found the plastic spacer and the cooling fins were fused to the bulb and the cooling fins were warped, likely due to the extreme heat. The spacer could not be removed easily, and rather than risk breakage, the employee packaged the bulb with the spacer and cooling fins securely and placed it in the designated location for used UV lamp collection. The screws of the lamp itself were noted to be extremely oxidized, but these are integral to the lamp and therefore replaced with it. No further damage was noted. The vendor has been contacted for replacement parts and guidance on other items to check that could have been damaged by this incident. The UV power supply is secured in the powered off state with no bulb installed and the system is disabled until repairs can be made.

**Contributing Factors**
- Defective Tools, Equipment
- Hot Objects

**Suggested Corrective Actions**
- Replace defective cooling fan.
- Replace damaged spacer and cooling fins.
- Follow manufacturer guidance on additional maintenance items that may have been impacted by overheat event.

**Root Cause**
- Faulty equipment (cooling fan stuck/failed)
Incident Details

Person Involved or Affected

Incident Details

Date of Incident (mm/dd/yyyy): 03/22/2022
Time of Incident: 03:00 PM

Campus: Seattle
Location: SIEG HALL
Room:

Supervisor

Full Name: SARAH M COPPOLA
Phone: 2012137850

Occupation / Position: ENG: Human Centered Design and Engineering
Department: ENG: Human Centered Design and Engineering

Classification

Near miss (Potential hazard -- no injury, exposure, or property damage)

Has Attachment(s):

Type of Incident

Injury Description (none, First Injury/Exposure): None
Body Parts Affected (none, First Injury/Exposure): None

Cause of Injury/ Damage, or Potential Injury/Damage:
Slip or Trip (No Fall)

Slip/Trip/Fall Information

Slip: Wet surface; Flooring Surface
Trip: None
Fall From Same Level: None
Fall From Elevated Height: None
Stairs: None

Contributing Factors

Equipment: None
Environment: Slippery, Uneven surface

Policies / Procedures: None

Human Factors: None

Suggested Corrective Actions by Affected Party

Suggested Corrective Actions: Undertake hazard assessment; Submit request for maintenance/repair

Treatment to remove moss and replace ground material to something like poured concrete.

Supervisor’s Comments

Root Causes:

Recomendations / Preventive Measures:

Other Comments:

Corrective Actions Target Date (mm/dd/yyyy): 
Corrective Actions Complete Date (mm/dd/yyyy): 

EH&S Comments

fwd: Scott Nelson.
## U-WIDE HEALTH AND SAFETY COMMITTEE

**3/9/2022 Meeting Minutes | 1:00 p.m. - 2:30 p.m. |**

<table>
<thead>
<tr>
<th><strong>Elected Member</strong>*</th>
<th><strong>Appointed Member</strong>*</th>
<th><strong>Proxy</strong>*</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ Ryan Hawkinson (1)</td>
<td>☒ Kurt Oglesby (3)</td>
<td>☒ Sulgi Lotze (1)</td>
</tr>
<tr>
<td>☑ Carmen Parisi, Chair (1)</td>
<td>☐ David Manley (5)</td>
<td>☐ Brett Magnuson (2)</td>
</tr>
<tr>
<td>☑ Nigel Horton (2)</td>
<td>☒ Kris Harrell (7)</td>
<td>☐ Colleen Irvin (9)</td>
</tr>
<tr>
<td>☑ Norm Kwasinski (2)</td>
<td>☐ David Zuckerman (10)</td>
<td>☐ Andrea Chateaubriand (10)</td>
</tr>
<tr>
<td>☑ Tony Colinares (3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Christine Aker (4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Mary Ann Valentine (4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Ansley Roman (5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Sarah O’Hara (6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Laura Harrington (6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Alaron Lewis (7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Hannah Wilson (8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Michelle Miller (8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Alexander Lefort (9)</td>
<td>☑ = attended meeting</td>
<td></td>
</tr>
<tr>
<td>☑ Sarah Coppola (9)</td>
<td>* = voting members</td>
<td></td>
</tr>
<tr>
<td>☑ David Warren (10)</td>
<td>13 = voting members for quorum</td>
<td></td>
</tr>
</tbody>
</table>

**Labor Union Member***

- ☒ Paula Lukaszek, WFSE 1488
- ☒ Ann Aumann, SEIU 925
- ☐ Antonio Vasquez, UAW 4121

**Senate Member***

- ☐ Faculty Senate – TBD
- ☒ GPSS – Gabby Rivera

<table>
<thead>
<tr>
<th><strong>Ex-Officio Member</strong></th>
<th><strong>Ex-Officio Member</strong></th>
<th><strong>Env. Health &amp; Safety Member</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>☒ Tracey Mosier, UWF</td>
<td>☒ Rick Gleason, DEOHS</td>
<td>☒ Katia Harb</td>
</tr>
<tr>
<td>☒ Chris Pennington, UWF</td>
<td>☒ Felicia Foster, AGO</td>
<td>☒ Denise Bender</td>
</tr>
<tr>
<td>☒ Steve Charvat, UWEM</td>
<td>☒ Nancy Gwin, AGO</td>
<td>☒ Erin McKeown</td>
</tr>
<tr>
<td>☒ Barry Morgan, UWEM</td>
<td>☒ Ken Nielsen, Risk Services</td>
<td>☒ Sonia Honeydew</td>
</tr>
<tr>
<td>☐ Lt. Chris Jaross, UWPD</td>
<td>☒ Susan Wagshul-Golden, UWT</td>
<td>☐ Lorilyn A. H. Ignao</td>
</tr>
<tr>
<td></td>
<td>☒ Allyson Long, UWB</td>
<td>☐ Tracy Harvey</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☒ Jenna Gravley</td>
</tr>
</tbody>
</table>

**Guest**

- ☐ N/A
Agenda

1. Attendance/Quorum
   Sonia Honeydew announced the meeting reached quorum.

2. Call to Order and Welcome
   Chair Carmen Parisi opened with a water and land acknowledgement. She explained that voting for this session would be determined by indication of opposing or abstaining.

3. Approval of Meeting Minutes
   Carmen called for approval of February U-Wide meeting minutes. Motion to accept called by Rick Gleason. Alexander Lefort seconded. Alaron Lewis abstained from approving February meeting minutes. Meeting minutes were approved.

4. Vice Chair Election
   Carmen announced that Liz Kindred has left the university and the committee needs a new Vice Chair. Christine Aker was nominated and she accepted the nomination. Carmen called for more nominations. No more individuals were nominated. Rick motioned to elect Christine. Nigel Horton seconded. No oppositions or abstaining. Christine confirmed acceptance of position.

5. COVID-19 Update
   Katia Harb presented the March 2022 COVID-19 update. She explained that the University is currently in a transition period where public health risk indicators show that Omicron is subsiding, and state and county policies are shifting. UW is seeing a significant drop in outbreak cases. Rates are falling, but not as quickly as weeks prior. Decrease in numbers of individuals testing and decreasing trends in those testing positive. COVID related hospitalizations are also decreasing. Changes in public health have led to local health departments and the CDC to lift mask mandates in most indoor settings. King and Pierce counties are lifting the mask mandate. UW is keeping a
mask mandate until March 28 except in medical facilities and shuttles. Outside of these areas, masks will be optional after March 28. Cases are expected to rise at the beginning of the new quarter, so masks are encouraged in the first two weeks. UW Athletics events will be aligned with the county policies. Individual departments are not able to set their own masking requirements for different spaces. FAQs to come. Unvaccinated individuals’ accommodations are being reviewed and decisions to come. EH&S face mask policy and eating guidelines will be updated on or before March 28.

Sarah Coppola asked who makes decisions about classroom policies and student protections. Katia responded that various groups have been consulted amongst faculty, Executive Office, and medical physicians. Community risk is low currently and emphasis on boosters and voluntary use of masking will continue. Policies will continue to be responsive to community risk levels. Sarah expressed her concerns about underrepresentation of faculty and teachers in the discussions.

Alaron Lewis asked about a shift in eating area restrictions/policies. Katia answered that shifts in updates will be communicated. Rick Gleason asked if he is allowed to offer hybrid format course for those not comfortable coming into classrooms. Katia recommended to work with Dean's Office and instructor specific instructions will be sent out.

CDC community-based guidance is based off community risk levels with the hope of lessening the stress on hospital capacities. King County is basing guidance off these measures. UW COVID-19 Contact Tracing program will be revisited at the end of spring quarter. Washington L&I is also updating COVID rules and relaxing masking requirements with the exception of healthcare and correctional facilities.

Barry Morgan from Emergency Management team presented on Business, Academic, & Research Continuity Plans. General definition of the plan is to restore functions after disasters. Presentation outlined critical functions. The HuskyReady Program reports about 200 plans are less than 25% complete and most plans have been dormant. Barry asked individuals to go into plans and revise and update with lessons learned from COVID-19 pandemic. Why do departments need a plan? If business is disrupted, UW will experience revenue loss and other damages to operations. Having plans in place is critical. Continuity plan should not be put off to be created during a disaster. Another major need to be considered is hardware and software. Relations with vendors should be reevaluated as well as who has access to business purchasing cards and how to recover data. Roles and responsibilities for individuals should be clearly defined as well as lines of succession. Snow plans are not the same as a holistic continuity plan that requires more detailed plans for alternate workspaces. Plans must address the environmental placement of UW Campuses in the Puget Sound area when considering hazards. Emphasis on continuing to revisit the plan as policies and as vendors change.

Not all individual departments are included in HuskyReady yet. Training in continuity plans will be offered. Sonia asked who should be notifying departments that BARC is needed. Steven Charvat answered that notification is top-down, called to increase emphasis and expressed preference for
readiness plans to be assigned to people who are knowledgeable and interested in the topic.

7. **Organizational Group Reports**
Carmen introduced Gabby Rivera and David Manley as new members and asked individual HSCs to report important committee information regarding incidents or incident trends, guest speakers, or other interesting topics. She said it is ok if there is nothing new or interesting to report.

**HSC-1:** Sulgi Lotze reported they made DEI updates to their charter; they used U-Wide charter as a guide.

**HSC-2:** Nigel Horton reported that they are currently working on updating charter with hopes to pass this month. Norman Kwasinski, nothing to report.

**HSC-3:** Kurt Oglesby, nothing to report.

**HSC-4:** Christine Aker reported they reviewed their charter and it is currently updated for the term.

**HSC-5:** Ansley Roman, nothing to report.

**HSC-6:** Laura Harrington reported that they currently have one open incident as an unknown type of mosquito was released.

**HSC-7:** Alaron Lewis, nothing to report.

**HSC-8:** Hannah Wilson, nothing to report.

**HSC-9:** Alexander Lefort reported that there have been several different break-ins and vandalism incidents. Two important safety and facilities positions are soon opening. Community has voiced worries over masking policy changes.

**HSC-10:** David Warren reported that elections have been completed with David Zuckerman and David Warren confirmed as well as a proxy.

8. **Union and Senate Reports**
**GPSS:** Gabby Rivera, nothing to report.

**WFSE 1488:** Paula Lukaszek reported that people are asking about masking mandates at the UW.

**SEIU 925:** Ann Aumann contacted Vice President of 925 about how to share information to union members, which include UW Medicine employees. No problem sharing U-Wide minutes and presentations, but HSC-5 meeting minutes beyond UW Medicine may be a bit more problematic.

**UAW 4121:** N/A
9. **Ex Officio Reports**

Carmen discussed the U-Wide potentially adding a couple of new ex officio positions from Transportation Services (TS) and Human Resources (HR). TS previously sent a member in 2018. Discussion amongst the larger group is necessary. Laura Harrington stated that she believes it is necessary to have TS representation and made a motion to add an ex officio position for them. Rick Gleason seconded. Carmen asked for abstentions or oppositions. None came up. Carmen stated that the motion has passed. Eric Johnson nominated as TS representative by Erin McKeown. Christine Aker seconded.

There was discussion regarding adding an HR ex officio position to serve as advisors, help to provide policies and frameworks related to employee safety, and considerations for labor union contracts. Carmen asked for a motion to include an ex officio from HR. Rick motioned for two HR reps, Christine Aker seconded. One private vote opposed to inviting HR representatives to the U-Wide. Katia will talk with HR about their representation and to find nominees.

Ansley Roman, HSC-5 representative and U-Wide representative, asked about option to include a security ex officio on U-Wide. Sonia mentioned we have UWPD as an ex officio security representative. Ansley stated security and UWPD are different and explained that the difference is UWPD is law enforcement, while UW Medical Security is more focused on policies. EH&S and U-Wide Chairs met later and concluded that there is not an entity who could adequately represent security type issues for personnel at all UW facilities, and instead security concerns or security personnel could be represented at the organizational health and safety committees.

**UW Facilities:** Tracey Mosier, nothing to report. Chris Pennington, nothing to report.

**Emergency Management:** Steven discussed that flooding, drought and smoke are all expected in the next few months. Inclement weather and radiation plans will be revisited. Barry mentioned that on March 25th, indoor alert system will be tested. Survey/QR code will be sent out. Reach out to alarm shop if concerned.

**UWPD:** N/A

**DEOHS:** Rick Gleason, nothing to report.

**AGO:** Nancy Gwin, nothing to report.

**Claim Services:** Ken Nielsen, nothing to report.

**UW Tacoma:** Susan Wagshul-Golden, nothing to report.

**UW Bothell:** Allyson Long reported that infrastructure and construction are impacting general functions. They are currently working to get clearer messaging for what is going on. Their committee is now full and are also recruiting evacuation wardens. Emergency coordinator/emergency management duties position opening.
10. EH&S Annual Report
Katia presented the EH&S Strategic Plan for FY20-22 and mentioned it will be updated by June 30, for the coming biennium. The Strategic Plan is how we measure and assess health and safety on campus. The goal is to achieve a positive culture of safety, and health and safety compliance. We hope to see safety fully integrated into our business processes. Safe workplace culture has many factors. All individuals are responsible for overall health and safety of the community. Various groups are involved in creating a safe workplace culture including EH&S, executive leadership, and safety committees.

EH&S is evaluating all of programs and ranking them for risk intelligence and against seven elements of compliance. Twenty programs were not meet goals and were categorized as less compliant. This can be because they are newer/less mature programs, not enough staff resources, unregulated areas, lower risk areas, or combinations. Our FY20-22 department goals were focused on supporting the campus response to COVID-19 and return to onsite work and classes, enhancing our chemical and physical safety in research, implementation of ticketing system, better alignment of our survey programs, and the development of an EH&S Business Plan. We are presently updating our strategy map, goals map, work plans, and staff professional development plans. Sarah asked about campus climate surveys, and Katia mentioned that EH&S participates in one and this is something to think about moving forward.

11. EH&S Updates
L&I: Erin summarized the L&I cases that are currently open, and later followed up with this report for meeting minutes:
“UWMC Lab Medicine runs a series of COVID-19 testing sites and the one on NE campus in the E4 parking lot was investigated by LNI due to an electrical cord safety concern and the need for fit-testing and training with respirators. LNI closed this inspection without violations as the University addressed these concerns.

We have an open investigation with LNI regarding the UWMC Reproductive Care Clinic at Roosevelt regarding social distancing of nurses, schedulers, and financial counselors.

The University has appealed an LNI investigation regarding respiratory protection at the HMC Anesthesia Care Unit after a COVID-19 outbreak. UW Medicine believes we have addressed the concerns through agreements for enhanced respiratory protection policies via a legal settlement agreement.”

Erin said EH&S will launch an updated Health and Safety Committee training course tomorrow. The course is required for the organizational committee members, and member will be sent an invite. She said the training provides an overview of the University of Washington's Health and Safety committee structure, your role and responsibilities as a committee member, expectations for member communication, meeting management, and the safety resources available to all members. Training also includes a second module called Five Why Root Cause Analysis to help committee members be more aware of how employees and supervisors can prevent accidents and incidents from recurring when they identify correctible root causes and take the appropriate corrective and preventative actions. She said the training displays how root cause analysis works...
and allows members to practice the Five Whys Technique, and shows members how supervisors document their incident investigations in the Online Accident Reporting System (OARS).

**General:** Denise announced a new EH&S training course on utility carts. She said EH&S will soon be sending out notices to stakeholders aiming to close the training gap and that EH&S will remain open for feedback.

Sonia asked the chairs of the ten organizational HSCs to begin the annual review of the UW Accident Prevention Plan.

12. **Good of the Order**
   Nothing submitted.

13. **Adjourn**
    Motion to adjourn meeting, Christine Aker motioned, Chris Pennington seconded.
    Meeting adjourned 2:31pm
University-Wide (U-Wide) Health and Safety Committee Meeting Agenda

April 13, 2022
1:00 p.m. – 2:30 p.m.
Zoom (screen required)
Zoom phone shortcuts to mute self *6, and raise hand *9

<table>
<thead>
<tr>
<th>Agenda Item</th>
<th>Lead</th>
<th>Process</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance/Quorum (13)</td>
<td>Erin McKeown</td>
<td>Verify quorum per Zoom gallery count</td>
<td>3 min</td>
</tr>
<tr>
<td>Call to Order and Welcome</td>
<td>Carmen Parisi</td>
<td>Robert’s Rules of Order</td>
<td>2 min</td>
</tr>
<tr>
<td>Approval of Meeting Minutes</td>
<td>Carmen Parisi</td>
<td>Discussion</td>
<td>5 min</td>
</tr>
<tr>
<td>COVID-19 Update</td>
<td>Katia Harb, EH&amp;S</td>
<td>Presentation</td>
<td>10 min</td>
</tr>
<tr>
<td>2021 OSHA Data Summary</td>
<td>Erin McKeown, EH&amp;S</td>
<td>Presentation</td>
<td>20 min</td>
</tr>
<tr>
<td>Organizational Group Reports*</td>
<td>Committee members</td>
<td>Discussion</td>
<td>15 min</td>
</tr>
<tr>
<td>Union &amp; Senate Reports</td>
<td>Union &amp; Senate members</td>
<td>Discussion</td>
<td>5 min</td>
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<tr>
<td>Ex Officio Reports</td>
<td>Ex-Officio members</td>
<td>Discussion</td>
<td>10 min</td>
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<tr>
<td>EH&amp;S Updates</td>
<td>Erin McKeown</td>
<td>Discussion</td>
<td>10 min</td>
</tr>
<tr>
<td>L&amp;I Update</td>
<td>Denise Bender</td>
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<tr>
<td>General Updates</td>
<td></td>
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</tr>
<tr>
<td>Good of the Order</td>
<td>Carmen Parisi</td>
<td>Discussion</td>
<td>5 min</td>
</tr>
<tr>
<td>Adjourn</td>
<td>Carmen Parisi</td>
<td>Robert’s Rules of Order</td>
<td></td>
</tr>
</tbody>
</table>

*Organizational Group Reports comprise only novel topics covered at their most recent meeting.

Please send ideas for agenda items to Carmen Parisi and Christine Aker at least 2 weeks prior to the scheduled meeting.