

Agenda – April 27th, 2022
Group 9 (College of Engineering) Health and Safety Committee

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, MoIES/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#> 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>.
- 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 uncapping 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

DRAFT Meeting Minutes

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

Meeting Date: March 23rd, 2022 (via Zoom)

Attended

Carter Beamish, AA
Colleen Irvin, BioE
Rachel Strickman, CEE
Michael Pomfret, CEI
Kameron Harmon, ChemE
Michael Glidden, CoE DO
Alexander Lefort, CSE

Selest Nashef, CSE
Denise Binder, EH&S
Sarah Coppola, HCDE
Sheila Prusa, ISE
John Young, MoES/NanoES
Tatyana Galenko, MSE
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.

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- 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.

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- 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.

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- 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.

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- 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:

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- 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.



Report Number: 2021-12-002

Contact EH&S at 206-543-7262

Person Reporting Incident

Occupation / Position: GRADUATE FELLOW STIPEND W/ BENEFITS

Date Reported (mm/dd/yyyy) : 12/01/2021

Department: GRAD: Finance

Time Reported: 11:00 AM

Person Involved or Affected

Department: ENG: Mechanical Engineering

Incident Details

Campus: Seattle

Date of Incident (mm/dd/yyyy) : 12/01/2021

Incident Location: WILCOX HALL

Time of Incident:

Room: 39

Other:

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.

Incident Description: 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
<https://www.ehs.washington.edu/system/files/resources/spill-response-poster.pdf>

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

Supervisor

Full Name: Dayong Gao

Phone: =+1 206 543-1411

Occupation / Position:

Email: dayong@uw.edu

Department: ENG: Mechanical Engineering

Classification

Property damage only

Has Attachment(s):

Type of Incident

Injury Description (none, if no injury/exposure): Exposure to Potential Biohazardous (Infectious) Material

Body Parts Affected (none, if no injury/exposure): None

Cause of Injury/ Damage, or Potential Injury/Damage: Biohazardous Material, Infectious Agents

Slip/Trip/Fall Information

Slip: None

Trip: None

Fall From Same Level: None

Fall From Elevated Height: None

Stairs: None

Contributing Factors

Equipment: Inadequate Guards/Barriers

Environment: None

Policies / Procedures: None

Human Factors: None

Suggested Corrective Actions by Affected Party

Suggested Corrective Actions: Change/review work procedures

Ensure that dialyzers are not stored uncapped or cut.

Otherwise procedures were properly followed and hazard was contained.

Supervisor's Comments

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.

Other Comments:

Corrective Actions Target Date (mm/dd/yyyy) : 12/01/2021

Corrective Actions Complete Date (mm/dd/yyyy) : 12/01/2021

EH&S Comments

fwd: Eleanor Wade, Judy Cashman, Zara Llewellyn, Tracy Harvey, Lesley Decker.



Report Number: 2022-02-012

Contact EH&S at 206-543-7262

Person Reporting Incident

Occupation / Position: PROJECT APPOINTMENT - OVERTIME ELIGIBLE (NE S X)
Date Reported (mm/dd/yyyy) : 02/03/2022
Department: ENG: Civil and Environmental Engineering-Stahl Lab
Time Reported: 01:44 PM

Person Involved or Affected

Department: ENG: Civil and Environmental Engineering-Stahl Lab

Incident Details

Campus: Seattle
Date of Incident (mm/dd/yyyy) : 02/03/2022
Incident Location: Time of Incident: 01:00 PM
Room: Rm 476
Other: Stahl lab, Benjamin Hall
needle is this:
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.
Incident Description: 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 passed through a sterile filter).
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Supervisor

Full Name: David A Stahl
Phone: =+1 206 685-8502
Occupation / Position: Email: dastahl@uw.edu
Department: ENG: Civil and Environmental Engineering-JM Academic

Classification

Injury requiring first aid

Has Attachment(s):

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: Inadequate Guards/Barriers
Environment: None
Policies / Procedures: None
Human Factors: None

Suggested Corrective Actions by Affected Party

Suggested Corrective Actions: Other

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

Supervisor's Comments

Root Causes: 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:

Corrective Actions Target Date (mm/dd/yyyy) : 02/07/2022
Corrective Actions Complete Date (mm/dd/yyyy) : 02/07/2022

EH&S Comments

fwd: Judy Cashman, Lesley Decker, Zara Llewellyn.



Report Number: 2022-03-004

Contact EH&S at 206-543-7262

Person Reporting Incident

Occupation / Position: RESEARCH SCIENTIST/ENGINEER 3 (E S 8)

Date Reported (mm/dd/yyyy) : 03/02/2022

Department: ENG: Materials Science and Engineering

Time Reported: 11:33 AM

Person Involved or Affected

Department: ENG: Materials Science and Engineering

Incident Details

Campus: Seattle

Date of Incident (mm/dd/yyyy) : 03/02/2022

Incident Location: MUELLER HALL

Time of Incident: 11:30 AM

Room:

Other:

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

Supervisor

Full Name: Unknown

Phone: Unknown

Occupation / Position:

Email: injury@u.washington..

Department:

Classification

Injury requiring first aid

Has Attachment(s):

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): Hands, Wrists

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: Other

Suggested Corrective Actions by Affected Party

Suggested Corrective Actions: Other

TA went over needle safety, student has never used the needles before and didn't know how hard to pull the cap of. After removal of the cap, poked right thumb. Moving forward, could ask experienced TA to handle all needle work or demonstrate several times on proper uncapping techniques.

Supervisor's Comments

Root Causes:

Recommendations / Preventive Measures:

Other Comments:

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

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

EH&S Comments

fwd: Judy Cashman, Eleanor Wade, Lesley Decker, Zara Llewellyn.



Report Number: 2022-03-015

Contact EH&S at 206-543-7262

Person Reporting Incident

Occupation / Position: RESEARCH SCIENTIST/ENGINEER 3 (E S 8)

Date Reported (mm/dd/yyyy) : 03/07/2022

Department: ENG: Materials Science and Engineering

Time Reported: 10:20 AM

Person Involved or Affected

Department: ENG: Materials Science and Engineering

Incident Details

Campus: Seattle

Date of Incident (mm/dd/yyyy) : 03/07/2022

Incident Location: MUELLER HALL

Time of Incident: 10:15 AM

Room: 176

Other:

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@u.washington..

Department:

Classification

Injury requiring first aid

Has Attachment(s):

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:

Recommendations / Preventive Measures:

Other Comments:

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

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

EH&S Comments

fwd: Brandon Kemperman, Brett Konzek.



Report Number: 2022-03-017

Contact EH&S at 206-543-7262

Person Reporting Incident

Occupation / Position: RESEARCH SCIENTIST/ENGINEER 2 (E S 7) Date Reported (mm/dd/yyyy) : 03/07/2022
Department: ENG: Electrical & Computer Engineering Orsborn Lab Time Reported: 01:19 PM

Person Involved or Affected

Department: ENG: Electrical & Computer Engineering Orsborn Lab

Incident Details

Campus: Seattle Date of Incident (mm/dd/yyyy) : 03/04/2022
Incident Location: MAG H.S.C./I Time of Incident: 03:30 PM
Room: I-561
Other:

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

Full Name: Amy Orsborn Phone: 2066162049
Occupation / Position: Email: aorsborn@uw.edu
Department: ENG: Electrical & Computer Engineering

Classification

Injury requiring first aid

Has Attachment(s):

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: Non-human Primates; Structures, Surfaces

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: Inattention

Suggested Corrective Actions by Affected Party

Suggested Corrective Actions: Other

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

Supervisor's Comments

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

fwd: Melinda Young, Eleanor Wade, Judy Cashman, Zara Llewellyn, Lesley Decker.



Report Number: 2022-03-021

Contact EH&S at 206-543-7262

Person Reporting Incident

Occupation / Position: UNDERGRADUATE RESEARCH ASSISTANT (NE H UAW ASE) Date Reported (mm/dd/yyyy) : 03/09/2022
Department: ENG: Collaboration Core - WNF JM Student Time Reported: 02:57 PM

Person Involved or Affected

Department: ENG: Collaboration Core - WNF JM Student

Incident Details

Campus: Seattle Date of Incident (mm/dd/yyyy) : 03/09/2022
Incident Location: FLUKE HALL Time of Incident: 02:15 PM
Room: 136 Chemical Storage
Other:

Incident Description: 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 XXXXXXXX and remained outside and called EH & S to alert them of the spill.

Supervisor

Full Name: Nicholas S Patrick Phone: ≈+1 206 221-1045
Occupation / Position: Email: patricns@uw.edu
Department: ENG: Collaboration Core - WNF Staff

Classification

Property damage only

Has Attachment(s):

Type of Incident

Injury Description (none, if no injury/exposure): None
Body Parts Affected (none, if no injury/exposure): None
Cause of Injury/ Damage, or Potential 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

Suggested Corrective Actions: Change/review work procedures

In the future using a more secure grip on bottles, especially glass bottles with no handles, where a hand is supporting it from the bottom and the sides. This would prevent from all slips in the case of the plastic bag shifting like I experienced.

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:

Corrective Actions Target Date (mm/dd/yyyy) : 03/16/2022 Corrective Actions Complete Date (mm/dd/yyyy) : 03/16/2022

EH&S Comments

fwd: Eleanor Wade, Tracy Harvey, Judy Cashman, Zara Llewellyn. Most of the liquid spilled into the room's grated berm. No one exposed.



Report Number: 2022-03-026

Contact EH&S at 206-543-7262

Person Reporting Incident

Occupation / Position: PROJECT APPOINTMENT - OVERTIME EXEMPT (E S X)

Date Reported (mm/dd/yyyy) : 03/11/2022

Department: ENG: Deans Office-Academic Affairs

Time Reported: 12:53 PM

Person Involved or Affected

Department: PROV: College of Engineering

Incident Details

Campus: Seattle

Date of Incident (mm/dd/yyyy) : 10/15/2021

Incident Location: MCMAHON HALL

Time of Incident:

Room: D050A

Other: ENGR RSO SPACE

Incident Description: **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 begun around Oct 15th of 2021.

Supervisor

Full Name: Kristi M Hill

Phone: =+1 206 616-5950

Occupation / Position:

Email: morgansn@uw.edu

Department: PROV: College of Engineering

Classification

Injury or Exposure to a Hazard -- no first aid required

Has Attachment(s): Yes

Type of Incident

Injury Description (none, if no injury/exposure): None

Body Parts Affected (none, if no injury/exposure): None

Cause of Injury/ Damage, or Potential Injury/Damage: Chemicals; Fire, Explosion; Ventilation, Indoor Air Quality Issues

Slip/Trip/Fall Information

Slip: None

Trip: None

Fall From Same Level: None

Fall From Elevated Height: None

Stairs: None

Contributing Factors

Equipment: Using Equipment Improperly; Improper Equipment

Environment: Inadequate Ventilation; Chemicals; Fire, Explosion

Policies / Procedures: Failure to Follow Procedures; Appropriate Procedures Non-existent; Inadequate Instructions, Procedures; Inadequate Planning, Preparation; Inadequate Support, Assistance

Human Factors: Inadequate Training; Failure to Follow Established Protocol/Procedures; Inattention

Suggested Corrective Actions by Affected Party

Suggested Corrective Actions: 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.

Supervisor's Comments

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.

Recommendations / Preventive Measures: monitored by the A&A department chair. All team actions have been paused until appropriate locations and approvals 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.

Other Comments:

Corrective Actions Target Date (mm/dd/yyyy) : 03/16/2022

Corrective Actions Complete Date (mm/dd/yyyy) : 03/16/2022

EH&S Comments

fwd: Brandon Kemperman, Brett Konzek; redirected Denise Bender, Erin McKeown, Scott Nelson. Scott and Denise working with Kristi.



Report Number: 2022-03-036

Contact EH&S at 206-543-7262

Person Reporting Incident

Occupation / Position: CONTINUING EDUCATION SPECIALIST 2 (E S 7)

Date Reported (mm/dd/yyyy) : 03/17/2022

Department: ENG: Deans Office-Academic Affairs

Time Reported: 12:27 PM

Person Involved or Affected

Department: ENG: Deans Office-Academic Affairs

Incident Details

Campus: Seattle

Date of Incident (mm/dd/yyyy) : 02/28/2022

Incident Location: McCarty Hall

Time of Incident: 07:00 PM

Room: B47

Other:

Incident Description: 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

Full Name: Deianeira L Caudle

Phone: =+1 206 543-6393

Occupation / Position:

Email: cauldld@uw.edu

Department: ENG: Deans Office-Academic Affairs

Classification

Injury requiring medical treatment (go to level 3 if in-patient hospitalization or amputation occurred)

Has Attachment(s):

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: Struck or Pinched by Moving Object

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: Sharp Objects

Policies / Procedures: Failure to Follow Procedures

Human Factors: Failure to Follow Established Protocol/Procedures; Inattention

Suggested Corrective Actions by Affected Party

Suggested Corrective Actions: Other

N/A Remember to lock the machine even when paused.

Supervisor's Comments

Root Causes: 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.

Recommendations / Preventive Measures: 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.

Other Comments:

Corrective Actions Target Date (mm/dd/yyyy) : 03/17/2022

Corrective Actions Complete Date (mm/dd/yyyy) : 03/17/2022

EH&S Comments

fwd: Brandon Kemperman, Brett Konzek.



Report Number: 2022-03-045

Contact EH&S at 206-543-7262

Person Reporting Incident

Occupation / Position: RESEARCH SCIENTIST/ENGINEER 4 (E S 9)

Date Reported (mm/dd/yyyy) : 03/21/2022

Department: ENG: Collaboration Core - WNF Staff

Time Reported: 09:02 AM

Person Involved or Affected

Department: ENG: Collaboration Core - WNF Staff

Incident Details

Campus: Seattle

Date of Incident (mm/dd/yyyy) : 03/21/2022

Incident Location: FLUKE HALL

Time of Incident: 07:00 AM

Room: 127B

Other:

Incident Description: 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.

Supervisor

Full Name: Nicholas S Patrick

Phone: ≈+1 206 221-1045

Occupation / Position:

Email: patricns@uw.edu

Department: ENG: Collaboration Core - WNF Staff

Classification

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

Has Attachment(s):

Type of Incident

Injury Description (none, if no injury/exposure): Property Damage Only

Body Parts Affected (none, if no injury/exposure): None

Cause of Injury/ Damage, or Potential Injury/Damage: Temperature Extreme (Hot or Cold)

Slip/Trip/Fall Information

Slip: None

Trip: None

Fall From Same Level: None

Fall From Elevated Height: None

Stairs: None

Contributing Factors

Equipment: Defective Tools, Equipment

Environment: Hot Objects

Policies / Procedures: None

Human Factors: None

Suggested Corrective Actions by Affected Party

Suggested Corrective Actions: Submit request for maintenance/repair

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.

Supervisor's Comments

Root Causes: Faulty equipment (cooling fan stuck/failed)

Recommendations / Preventive Measures: Replace defective parts. Check for other items that may have been damaged by overtemp event.

Other Comments: Lamps in these tools are checked weekly (usually Mondays) to gauge their need for replacement. This involves intensity and focus checks. The focus on this tool was adjusted the previous Monday, which involves working directly with the lamp. Employee did not notice anything abnormal during that procedure. Fan appears to have failed sometime within the previous week as such. An improperly cooled lamp has a risk of explosion, so we consider this a near-miss and are glad nothing more occurred. I do not believe any individual or additional act.

Corrective Actions Target Date (mm/dd/yyyy) : 03/21/2022

Corrective Actions Complete Date (mm/dd/yyyy) : 03/21/2022

EH&S Comments

fwd: Denise Bender, Brandon Kemperman.



Report Number: 2022-03-051

Contact EH&S at 206-543-7262

Person Reporting Incident

Occupation / Position: ASSISTANT TEACHING PROFESSOR

Date Reported (mm/dd/yyyy) : 03/23/2022

Department: ENG: Human Centered Design and Engineering

Time Reported: 09:15 AM

Person Involved or Affected

Department: ENG: Human Centered Design and Engineering

Incident Details

Campus: Seattle

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

Incident Location: SIEG HALL

Time of Incident: 03:00 PM

Room:

Other:

Incident Description: Ground outside is uneven and covered in moss. Had a near miss slip. No injuries.

Supervisor

Full Name: SARAH M COPPOLA

Phone: 2012137850

Occupation / Position:

Email: scoppola@uw.edu

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, if no injury/exposure): None

Body Parts Affected (none, if no 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:

Recommendations / 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. |

Elected Member*		Appointed Member*		Proxy*	
<input type="checkbox"/>	Ryan Hawkinson (1)	<input checked="" type="checkbox"/>	Kurt Oglesby (3)	<input checked="" type="checkbox"/>	Sulgi Lotze (1)
<input checked="" type="checkbox"/>	Carmen Parisi, Chair (1)	<input type="checkbox"/>	David Manley (5)	<input type="checkbox"/>	Brett Magnuson (2)
<input checked="" type="checkbox"/>	Nigel Horton (2)	<input checked="" type="checkbox"/>	Kris Harrell (7)	<input type="checkbox"/>	Colleen Irvin (9)
<input checked="" type="checkbox"/>	Norm Kwasinski (2)	<input type="checkbox"/>	David Zuckerman (10)	<input type="checkbox"/>	Andrea Chateaubriand (10)
<input checked="" type="checkbox"/>	Tony Colinares (3)				
<input checked="" type="checkbox"/>	Christine Aker (4)				
<input checked="" type="checkbox"/>	Mary Ann Valentine (4)			<input checked="" type="checkbox"/>	Labor Union Member* Paula Lukaszczek, WFSE 1488
<input checked="" type="checkbox"/>	Ansley Roman (5)			<input checked="" type="checkbox"/>	Ann Aumann, SEIU 925
<input type="checkbox"/>	Sarah O'Hara (6)			<input type="checkbox"/>	Antonio Vasquez, UAW 4121
<input checked="" type="checkbox"/>	Laura Harrington (6)				
<input checked="" type="checkbox"/>	Alaron Lewis (7)				
<input checked="" type="checkbox"/>	Hannah Wilson (8)			<input type="checkbox"/>	Senate Member* Faculty Senate – TBD
<input type="checkbox"/>	Michelle Miller (8)			<input checked="" type="checkbox"/>	GPSS – Gabby Rivera
<input checked="" type="checkbox"/>	Alexander Lefort (9)	<input checked="" type="checkbox"/> = attended meeting * = voting members 13 = voting members for quorum			
<input checked="" type="checkbox"/>	Sarah Coppola (9)				
<input checked="" type="checkbox"/>	David Warren (10)				
Ex-Officio Member		Ex-Officio Member		Env. Health & Safety Member	
<input checked="" type="checkbox"/>	Tracey Mosier, UWF	<input checked="" type="checkbox"/>	Rick Gleason, DEOHS	<input checked="" type="checkbox"/>	Katia Harb
<input checked="" type="checkbox"/>	Chris Pennington, UWF	<input checked="" type="checkbox"/>	Felicia Foster, AGO	<input checked="" type="checkbox"/>	Denise Bender
<input checked="" type="checkbox"/>	Steve Charvat, UWEM	<input checked="" type="checkbox"/>	Nancy Gwin, AGO	<input checked="" type="checkbox"/>	Erin McKeown
<input checked="" type="checkbox"/>	Barry Morgan, UWEM	<input checked="" type="checkbox"/>	Ken Nielsen, Risk Services	<input checked="" type="checkbox"/>	Sonia Honeydew
<input type="checkbox"/>	Lt. Chris Jaross, UWPd	<input checked="" type="checkbox"/>	Susan Wagshul-Golden, UWT	<input checked="" type="checkbox"/>	Lorilyn A. H. Ignao
		<input checked="" type="checkbox"/>	Allyson Long, UWB	<input type="checkbox"/>	Tracy Harvey
				<input checked="" type="checkbox"/>	Jenna Gravley
Guest					
<input type="checkbox"/>	N/A				

Agenda

- 1. Attendance/Quorum**
- 2. Call to Order and Welcome**
- 3. Approval of Meeting Minutes**
- 4. Vice Chair Election**
- 5. COVID-19 Update**
- 6. Business, Academic, & Research Continuity (BARC) Plans**
- 7. Organizational Group Reports**
- 8. Union and Senate Reports**
- 9. Ex Officio Reports**
- 10. EH&S Annual Report**
- 11. EH&S Updates: L&I and General**
- 12. Good of the Order**
- 13. Adjourn**

Minutes by Lorilyn Apple H. Ignao

The meeting was conducted via Zoom and was recorded.

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.

6. Business, Academic, & Research Continuity (BARC) Plans

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

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

*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.