

See instructions

Other Business:

Workplace Safety & Health
 401 York Avenue, Winnipeg, Manitoba R3C 0P8
 T 204 957(o)4(r)5(k)7()-5(A)-4(v)7(e)4(n)4(u)4(e)4(,)5(

Agenda Item	Subject, Concern or Problem (See reverse for completion instructions)	Recommendation or Action to Be Taken Action By (who & when)	Status
Call to Order Introduction	Meeting Called to Order, 1:05pm		
A. Approval of Agenda		Moved by N. Taiarol, Seconded by K. Breward	
B. Acceptance of Minutes	Minutes accepted.	Moved to accept by N. Taiarol, Seconded by K. Breward	
C. Business Arising from the minutes:	<ul style="list-style-type: none"> - (KS) Update to May minutes re: IAQ testing in 2RC096 and 2RC094 were below the lowest Personal Exposure Limit (PEL) or Time Weighted Average (TWA) we could find. - Members no longer on the committee are: Deanna Pollock, moved to ELP. 		
D. Reading Correspondence	<ul style="list-style-type: none"> - (KS) Received info from Jamie Hall, COO at SafeWork MB; KS to send attachments of info received 	K. Smith to send copies of correspondence as received from SafeWork.	
E. New Business	Return to Safe Services Phase II <ul style="list-style-type: none"> o Post-secondary institutions (PSI's) limited to specific key guidelines; links to provincial regulations/guidelines: https://www.gov.mb.ca/covid19/restoring/phase-two.html o Academic Advising Committee formed and headed by T. Wood; to determine which classes/labs/practicums can be delivered remotely and which cannot. o Processes and requirements being reviewed but timeline is tight with efforts to be in place for July registration. o Multiple considerations with signage, PPE, barriers being identified. o Remote work to continue for most departments. o EPP will evaluate and provide approval if a department is to resume on campus operations. 		

Co-Chairpersons' Signatures Please indicate by (X) in the brackets below who chaired this meeting.

BOTH management and worker co-chairs must sign each page of the minutes when they agree that the minutes are complete and accurate.

If one, or both co-chairs do not agree with the minute record, please attach concerns on a separate page.

In my opinion, the above is an accurate record of this meeting.

() Print name of Employer Co-Chair- Roberta Marsh (X) Print Name of Worker Co-Chair Natasha Taiarol

Signature _____ Signature _____

