The meeting was convened by Chair, Colleen Huls. Attendees introduced themselves.

**Members Present:** Eileen Bergt (Landscape Services), Roger Quiring (UHC), Colleen Huls (Information Services), Jane Wemhoff (Dining Services), Doug Rudeen (ARDC), Tony Hernbloom (CREC), Deb Pearson (Libraries), Edie Schleiger (UNOPA), Beth Whitaker (Biological Sciences), Don Beermann (Office of Research-IACP), Bob Beckstrom (BSM), Lynn Doser (Sheldon), Charlie Griesen (Utilities), Sharon Clowser (VBMS), Charlotte Evans (UNLPD), Karen Schultz (PHREC remotely), Logan Dana (NEREC remotely), Kim Phelps (Business & Finance), Betsy Howe (EHS), Yoko Smith (EHS), Guest: Conor Dunn (Daily Nebraskan).

**ENVIRONMENTAL HEALTH AND SAFETY:**

**FY 2011-2012 (2nd Quarter) Injury Incident Report**

Yoko Smith reviewed the fourth quarter injury incidents. Following is a recap:

- Of the 47 injury incidents between October 1 and December 31, 2011, 27 (57%) were classified as OSHA-recordable, incidents considered more serious, for example involving medical treatment beyond first aid, days away from work, etc.
- Of the OSHA-recordable incidents, “Falls” was the predominant category of injury, with nine incidents (33%) followed by “Struck by/struck against” with six incidents (22%)
- Office workers sustained eight (29.6%) of the OSHA-recordable injuries.
- Of the 27 OSHA-recordable incidents, the most prevalent causal factor was “Location/position problem (equipment or person)” with four instances followed by “Improper equipment usage” with three instances. To mitigate injuries due to these causal factors:
  - Workers should be familiar with and follow manufacturer’s recommendations for equipment use.
  - Workers should maintain awareness of tools/body parts in relation to equipment they are working with and space they are moving through. If there is a concern about location of equipment to allow safe usage, the worker should consult with their supervisor.

**FY 2011-2012 (2nd Quarter) Safety Audit Overview**

Safety audits are conducted by EHS on a schedule based upon identified hazards and regulatory requirements. In general, higher hazard areas are audited more frequently than lower hazard areas. The total number of audits conducted by EHS personnel this quarter was 173. Audit statistics reviewed are Occupational Safety findings and do not include specific program audits, such as Radiation Safety, Biosafety, or other.

The usage type for areas audited was: 120 Laboratory, 29 Shop & Utility, 23 Office & Assembly Areas (such as classrooms) and one Kitchen. Audits were conducted in all or part of 27 different buildings. Each “audit” may include more than one room (same use + same room owner=1
Betsy Howe provided an overview which noted deficiencies found and their prevalence within the different classifications of space audited at UNL during the second quarter. Following are highlights:

- The largest number of deficiencies related to “Chemicals” (70 instances), which might be expected given the predominance of Laboratory and Shop audits.
  - The most common finding was “No room door posting of hazards within/inaccurate posting/incomplete posting.” Door postings of potentially hazardous areas support routine hazard communication and facilitate response actions during an emergency.
  - The second most common finding was “No eyewash/safety shower or testing not performed/eyewash and/or shower not accessible.” Emergency showers and eyewash stations are required in chemical, biological, and radioactive laboratories and shop areas where hazardous chemicals are used and/or acid batteries are charged. Eyewash stations should be flushed weekly to ensure proper operation and to remove any residues that may accumulate in the system during disuse.
- The number noted for a particular deficiency is the number of occurrences and does not necessarily reflect the severity of the deficiency. For example, there was only one instance in which workers were not aware of the location of Material Safety Data Sheets (MSDS). Review of MSDS for chemicals in use/storage within a work area is required. The MSDS is a key tool for workers to determine hazards associated with chemicals in use/storage in their work area to effect appropriate mitigation of the hazards.
- The second largest category of deficiency was “Electrical” (20 instances). Within this category there were 6 instances of power strips, surge protectors, or extension cords not plugged directly into a permanent outlet (4 Lab, 1 Shop, 1 Office) and extension cords being used on a permanent basis (1 Shop, 2 Office). Extension cords are designed for temporary (short time) use only. These two areas of deficiency can cause fires, lead to electrical burns, and pose a trip hazard.
- In the Fire/Life Safety category, obstructed sprinkler heads were noted. Room occupants, especially in office or storage areas, may neglect to note the location of sprinklers that are part of the fire suppression system. There must be 18” clearance in all directions around a sprinkler, which is usually compromised by stacking/storing materials on shelves.

OLD BUSINESS
There was no old business.

NEW BUSINESS

New Members
Since there are several new members, largely due to retirements from UNL, an updated Membership Roster was distributed.
Campus-wide Safety Walk
Charlotte Evans, UNL Police Department Assistant Chief, reported on the November Safety Walk. The Safety Walk used to occur twice a year in different seasons to assess different potential safety issues. Due to decreasing participation, the Safety Walk is now conducted once a calendar year, alternating between spring and fall. This effectively means that the Safety Walk occurs every 6 or 18 months.

This year’s walk was in November. On both City and East Campus participants noted some lights out and bushes that need attention. Findings were minor in nature and will be addressed by the appropriate area.

Assistant Chief Evans relayed that she had recently received an email indicating a concern about the level of lighting in the Haymarket softball complex. The campus constituent in questions did not feel safe walking after dark at the Haymarket Softball Complex, in particular in the area between the complex and the media box. A UNLPD officer corroborated that the lighting in the area mentioned was not at a level to ensure safe passage. Colleen will contact Linda Ybarra, the CUSC Athletics Department representative, for follow-up.

Unit Safety Committee Discussion

Various CUSC members shared their experience with and suggestions for UNL Safety Committees, both current and potential:

- Different departments/areas in a building might band together to form one committee, in particular if the building includes a relatively small number of staff.
- Committees might include a wellness component along with safety. Wellness can contribute to safety and is sometimes perceived as more “interesting” by some individuals.
- Various ways committees can keep safety in the forefront of their department/area throughout the month include such activities as developing/distributing newsletters, arranging for short “tailgate talks” on a specific safety topic, rotating non-regulatory safety reminder signage regularly, displaying a “Pat” poster to visually show workers areas of the body of co-workers who were injured over the past year. The important thing is to keep safety awareness in the forefront of the workplace.
- The most successful safety committees have the support of top management and work to establish and maintain a safety culture.

Ideas were explored on how mentoring between safety committees might be fostered. Betsy will explore possibilities leveraging the Safety Committee area of the EHS web site. Another idea proposed was a Safety Committee listserv. This would allow the various safety committee chairs/contacts to query others who are in their position within different departments about concerns and to share successes that might foster ideas for other safety committees at UNL.

CUSC members reviewed excerpts from a Safety Committee Toolkit in development by EHS. The draft format is: a brief topic introduction followed by a sample or template as applicable. For committees seeking more in depth information on a particular topic, such information would be made available in the format of web-based training. CUSC members suggested that the
Safety Committee Toolkit be available electronically on the Safety Committee portion of the EHS web site, under “Other Resources” so it is readily accessible/visible.

Betsy Howe made the CUSC aware that EHS is a member of the local Nebraska Safety Council. As such they have access to resources to share with campus safety committees. Both Injury Incident and Safety Audit overviews of relevance to a department/facility are furnished quarterly by EHS to the identified safety committees.

Discussion was tabled until next meeting on how information contained within the article “Five Crucial Conversations That Drive Workplace Safety” can best be used to foster safety at UNL, either through safety committees or in general.

Leadership Change
July 1, 2012 is when Beth Whitaker will move from Vice Chair to Chair of the CUSC. Therefore at the next meeting the group will need to elect a Vice Chair to assume that position July 1. Colleen requested that committee members consider their nomination for CUSC Vice Chair, to serve 2012-2013, assuming the duties of Chair for the 2013-2014 fiscal year. Members may nominate themselves or another member by contacting Colleen (chuls1@unl.edu or 402-472-2131) or bringing their nomination to the April meeting.

CLOSING REMARKS
The next meeting will be April 17, 2012, at East Campus Union. The April meeting is an Open Forum meeting.

The meeting was adjourned by Chair Colleen Huls.
CUSC Workers Compensation Incident Overview (Oct. – Dec. 2011)

As of December 31, 2011, forty-seven (47) FRIs were received for injuries occurring between October 1 and December 31, 2011.

- Eleven (11) or 23% were “report only” (no medical treatment sought).
- Nine (9) or 19% were not OSHA-recordable, meaning they were minor in nature (requiring only one visit to clinic without prescription medication).
- Twenty-seven (27) or 58% were classified as recordable, and are considered potentially more serious. Of those recordable incidents, ten (10) or 21% were lost time incidents that required the employees to be off work, to be transferred to a different job or to be under restricted duties.

<p>| OSHA Recordable Incidents from October – December 2011 (Total 41)- Event/Exposure by Worker Type | Food Service | Maintenance / Utilities | Construction | Material handler | Custodial | Laboratory | Office | Agriculture/ Landscape | Animal Handler | Sports / Coach | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Exposure to harmful substances (chemical, heat, biological materials, noise, etc.) | | | | | | | | | | | 1 |
| Lifting/ carrying | 1 (Improper use of PPE) | 1 (Deviation from safety protocol) | 1 (Deviation from safety protocol) | | | | | | | | 3 |
| Overexertion in holding/ carrying | | | | | | | | 1 (Engineering control not available) | | | 1 |
| Fall | 1 (Weather) | | | | 1 (Improper use of equipment) | | | 1 (Uneven terrain) | | | 9 |
| Contact with objects/ equipment | | | | | | | | | 1 (PPE not used) | | 1 |
| Struck by /struck against | 1 (Location problem) | | | | 2 (Location problem, engineering control not used) | 2 (Engineering control not used, inattention) | | | 1 (Improper use of equipment) | | 6 |
| Caught in | | | | | | | | | | | 3 |
| Transportation | 1 (PPE not used) | | | | | | | | | | 1 |
| Walking | 1 (Unable to) | | | | | | | | | | 1 |</p>
<table>
<thead>
<tr>
<th>Assault by animal/person</th>
<th>identify causal factors</th>
<th>1</th>
<th>(Location problem)</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Totals</td>
<td>1 4 1 1 1 3 8 3 4 1</td>
<td>27</td>
<td></td>
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</tbody>
</table>
Safety Audit Overview (October 1 – December 31, 2011)

Safety Audits are conducted on a schedule, based on identified hazards and regulatory requirements. In general, each “Audit” reflects the findings in more than one room (same use, same room owner).

<table>
<thead>
<tr>
<th>Areas audited (*denotes entire building audited):</th>
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<tbody>
<tr>
<td>Ag Implement Outstate Storage Building*</td>
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<tr>
<td>Animal Sciences Complex</td>
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<tr>
<td>Abel-Sandoz Food Service</td>
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<tr>
<td>Bessey Hall</td>
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<tr>
<td>Bioscience Greenhouses-Beadle Center*</td>
</tr>
<tr>
<td>Brace Laboratory</td>
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<tr>
<td>Cather-Pound Food Service</td>
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<tr>
<td>Colonial Apts, Shop 1, 3332 Starr*</td>
</tr>
<tr>
<td>Filley Hall</td>
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<tr>
<td>Hamilton Hall</td>
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<tr>
<td>Harper Dining Center</td>
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<tr>
<td>Kauffman Academic Residential Center</td>
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<tr>
<td>(L.W.) Chase Hall</td>
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<tr>
<td>Morrison Life Sciences Research Center</td>
</tr>
</tbody>
</table>

Deficiency Recap (NOTE: Number of deficiencies is not related to seriousness of violation):

**Chemical Deficiencies in L(ab)s & S(hop)s—70 total instances**

- No room door posting/posting inaccurate/incomplete (19L, 1S)
- No eyewash/safety shower or testing not performed/not accessible (10L, 1S)
- Chemical waste improperly stored/labeled/container not closed (13L)
- Chemicals stored near incompatible chemicals/amounts exceed allowed limit (eg. For flammables)(3L, 1S)
- Chemicals not adequately labeled/label damaged/missing (3L, 2S)
- Workers not aware of location of MSDSs (1L)
- PPE not available (1S)
- Hydrofluoric acid in use and no Calcium gluconate paste available for immediate first aid upon exposure (1L)

**Electrical Deficiencies in L(ab)s, S(hop)s, & O(office)s—20 total instances**

- Electrical panel access blocked (4S, 3O)
- Power strip/surge protector/extension cord not plugged directly into a permanent outlet (4L, 1S, 1O)
- Extension cord not restricted to temporary use (1S, 2O)
- Damaged cord in use (1S)
- GFCI not installed in damp/wet areas or outlets in damp areas not protected by watertight housings (1L)

**Fire/Life Safety Deficiencies in L(ab)s, S(hop)s, &O(office)s—7 total instances**
- Fire extinguishers expired/not mounted/not fully charged (4L)
- Sprinkler heads obstructed (1S, 2O)

**Engineering/Administrative Control Deficiencies in L(ab)s & S(hop)—6 total instances**
- Ventilated cabinet inspection expired (3L, 1S)
- Ventilated cabinet not properly used (blocked/chained open, used for storage)(1L)
- Sharps not disposed in rigid container/lying unattended in work area (1L)

**Machine-related Deficiencies in (S)hops—2 total deficiencies**
1. Machine not guarded/guard not properly adjusted/inadequate (1S)
2. Abrasive Wheel not properly adjusted (1S)