AGENDA

1. Introductions & Welcome (Zoom mute) (3:00 – 3:05 p.m.) Michael Livingston

2. Old Business
   A. Any Old Business (3:05 – 3:10 p.m.)

3. New Business
   B. Other new business (3:25 – 3:30 p.m.)

4. Injury Incidents 2nd Quarter 2023-24 & FY 2022-2023 comparison with FY 2021-2022 (3:30 – 3:45 p.m.) Brenda Osthus

5. Adjourn Michael Livingston

Meeting Schedule (EHS training room, Warehouse 1, East Campus and Zoom)

- March 26, 2024 (to avoid spring break)- Open Forum
- May 21, 2024 (Injury/Illness report January-March 2024)
- July 16, 2024 (Injury/Illness report April-June 2024)

Goal FY 2024-2026:

*Develop, review, and maintain lines of safety communication while fostering a culture of safety awareness, where everyone is encouraged to report “near misses” and unsafe practices. Use safety reports as lessons learned to share anonymously throughout the university to prevent reoccurrences/similar incidents.*
The January meeting was convened at 3:00 p.m. by Chair, Michael Livingston.

INTRODUCTIONS

All attendees introduced themselves by name and the department/facility they represent.

Members In Attendance: Martha Morton (Chemistry), Ron Bacon (Custodial Services), Eileen Bergt (Landscape Services), Alan Boldt (BSE), Rick Campos (FP&C Fire Inspector), Marty Fehringer (UNLPD), Brent Morgan (Libraries), Barb McCain (Dining Services), Samantha Link (ARD Greenhouse), Jody Wood (Institutional Equity and Compliance) Jacob Sharrer (Husker Energy & Power), Dennis Ferraro (SNR), Kyle Hansen (CREC), Jon Shields (Nebraska Unions), Sandra Christopherson (ARD Project Mgmt.), Brenda Osthus (EHS), Elizabeth (Betsy) Howe (EHS administrative support).

Safety Committee Chairs/Contacts: Darren Johnson (ENREEC-Mead), Erin Bauer (Entomology), Kyle Broderick (Plant Pathology), Xiaoshan Xu (Physics) and Zhiguang (Zach) Sun (NCMN)

OLD BUSINESS

A survey was sent to membership regarding when to hold November meetings when the CUSC meeting date occurs the same week as Thanksgiving. This is not the situation every year but occurs frequently enough for consideration.

The results of the survey indicated that those members who voted prefer moving the regular November meeting back one week, to occur the second Tuesday of November, in years that the regular meeting date would be during Thanksgiving week.

There was no other old business.

NEW BUSINESS

Resource – Winter Weather Hazards

Darren Johnson, ENREEC-Mead, provided a talk on Winter Weather Hazards. Areas covered were:

- Hazards overview
• Frostbite & Hypothermia identification, avoidance strategies, first aid
• Winter Driving

Other New Business

Process for Review of Injury Incidents

Brenda Osthus, EHS, reviewed how injury incidents are investigated. EHS receives all First Reports of Injury from Risk Management. Brenda reviews those and as needed may or may not reach out to the injured individual or their supervisor for clarification of what occurred. The reports may include corrective action taken. If no corrective action is indicated Brenda provides such information for mitigation to help prevent such future incidents.

Many of the injuries are extremely minor in nature, such as a paper cut. Those typically are not followed up on. If there are multiple similar incidents, such as falls due to slippery conditions, Brenda will contact Landscape Services and let them know of problem areas. Sometimes winter slip/fall incidents are widespread and thus require a lot of extra caution by all workers.

Injuries or Near Misses may be highlighted in the monthly EHS safety listserv. EHS often anticipates that a certain type of injury is likely, such as those associated with winter walking and driving, and highlights safety measures for those topics ahead of time.

Some Unit Safety Committees request periodic information on injury incidents, for example, quarterly, which Betsy Howe provides. EHS Senior Staff are assigned to research-intensive buildings. Senior Staff members will meet periodically with the Department Chair of their building to share overall safety items identified through EHS Safety and Compliance Audits.

There was no other new business.

Injury Incident Reporting for 2nd Quarter 2023-2024

Betsy Howe noted that from October 1, 2023, through December 31, 2023, there were thirty-nine (39) First Reports of Injury (FRIs). 30.8% were classified as OSHA-Recordable, considered more serious injury incidents. 2.6% of the injury incidents required workers to be off work or resulted in restricted duty for the worker.

53.8% of the injury incidents this past quarter were Report Only (no medical treatment sought). There were four near misses reported during this reporting period. Report Only and Near Miss reports are used to raise awareness of potential hazards across the university.
The Event/Exposure by Employment Type evaluation indicated that the primary event/exposure was again “Struck Against or By,” followed by “Fall” despite the fact that only one fall was due to weather/surface conditions.

Members were provided with a report on OSHA Recordable injury Incidents by Employee Type. Five of the OSHA-Recordable injury incidents occurred to Maintenance/Utilities workers. Office, Laboratory and Animal Handler worker type groups each had two OSHA-Recordable injuries. There were three Near Misses. The Near Miss causal factors were Housekeeping, Location/Position Problem (equipment or person), and Material/Equipment. All instances could have been mitigated by the workers paying close attention to their body position in relation to the item they came into contact with.

Annual reports comparing fiscal year 2022-23 and 2023-24 showed that the number of FRIs increased from 193 in fiscal year 2022-23 to 218 in fiscal year 2023-24. However, in 2023-24 there were 81 OSHA-Recordable or Lost Time incidents, one less than in 2022-23.

**CLOSING REMARKS**

Michael Livingston, Chair, adjourned the meeting at 3:34 pm. The next meeting will be on March 26, 2024, and will be an Open Forum meeting.
Hazards

- Strong winds and wind chills
  - Extremely cold temperatures
  - Low visibility
- Cold and Flu Viruses
- Slippery driving and walking surfaces

1: Proper clothing for the anticipated elements. Keep spare change of dry clothes and footwear

  You can’t see or be seen. (story about I-80 wreck)

2: Preface not a DR. Cold and Flu: Avoid by frequent hand washing – lotion for hands drying out and cracking, find a way to exercise indoors and maintain hydration levels.

3: Slips/Trips & Falls increase in the winter months. Traction foot wear.
• **Winter Storm Watch:** A winter storm with heavy sleet, snow or ice is possible.

• **Winter Storm Warning:** Severe snow, ice or sleet is expected or already occurring.

• **Blizzard Warning:** Characterized by high winds and heavy snow fall, blizzards generally produce zero visibility, large snow drifts, and life-threatening wind chills.

• **Wind-Chill Warning:** A wind-chill warning is issued for low temperatures and strong winds that will result in frostbite or hypothermia without proper precautions, such as wearing several warm protective layers or avoiding the outside weather altogether.

1: Ensure your home and vehicle have preparedness kits, and stay tuned to your local forecast to get the latest information. Best source of information is an NOAA weather radio.
**Flurries:** Light snow falling for short durations with little or no accumulation.

**Snow Showers:** Snow falling at varying intensities for brief periods of time. Some accumulation is possible.

**Snow Squalls:** Brief, intense snow showers accompanied by strong, gusty winds. Accumulation may be significant.

**Blowing Snow:** Wind-driven snow that reduces visibility. Blowing snow may be falling snow and/or snow on the ground picked up by the wind.

**Blizzard:** Sustained winds or frequent gusts of 35 mph or more with snow and blowing snow frequently reducing visibility to less than a quarter mile for 3 hours or more.

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**Potential Winter Storm Impacts**

<table>
<thead>
<tr>
<th>Winter Weather Area</th>
<th>Expect Winter Weather:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minor Impacts</td>
<td>Expect a few inconveniences to daily life.</td>
</tr>
<tr>
<td></td>
<td>• Winter driving conditions. Drive carefully.</td>
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<tr>
<td>Moderate Impacts</td>
<td>Expect disruptions to daily life.</td>
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<tr>
<td></td>
<td>• Hazardous driving conditions. Use extra caution while driving.</td>
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<td></td>
<td>• Closures and disruptions to infrastructure may occur.</td>
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<tr>
<td>Major Impacts</td>
<td>Expect considerable disruptions to daily life.</td>
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<tr>
<td></td>
<td>• Dangerous or impossible driving conditions. Avoid travel if possible.</td>
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<td></td>
<td>• Widespread closures and disruptions to infrastructure may occur.</td>
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<tr>
<td>Extreme Impacts</td>
<td>Expect substantial disruptions to daily life.</td>
</tr>
<tr>
<td></td>
<td>• Extremely dangerous or impossible driving conditions. Travel not advised.</td>
</tr>
<tr>
<td></td>
<td>• Extensive and widespread closures and disruptions to infrastructure may occur.</td>
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<td></td>
<td>• Life-saving actions may be needed.</td>
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Frostbite & Hypothermia

- Severe reaction to cold exposure that can cause permanent damage.
- Can occur in a matter of minutes.
- Your body's survival mechanism

To protect the vital inner organs, the body cuts circulation to your extremities: feet, hands, nose, etc., which eventually freeze.

To avoid frostbite, stay inside during severe cold, especially when the windchill is -50°F or below.

If you must go out, try to cover every part of your body: ears, nose, toes and fingers, etc.

Mittens are better than gloves because they keep the heat of the fingers together.
Frostbite

When skin and underlying tissues freeze from being exposed to very cold temperatures.

Exposed skin and extremities are the most susceptible

Signs and Symptoms of Frostbite
- Redness or pain in any exposed skin area
- Numbness
- White or grayish-yellow skin
- Skin feels unusually firm or wavy
Frostbite First Aid

- Check for hypothermia if you suspect hypothermia seek medical assistance immediately.
- Protect your skin from further damage
- Get indoors ASAP
  - Don’t rub or massage cold body parts
  - Don’t walk on frostbitten feet (if possible)
  - Place hands in your armpits
  - Hug another person or animal.
  - Drink warm liquids
  - Put on extra clothing layers
  - Remove rings, watches and other tight jewelry.

Tight jewelry can restrict blood flow and metal can draw heat away from the body.
Indoors
- Get in a warm, NOT hot bath.
- Wrap face and ears in a warm moist towel
- Avoid stoves, and heating sources, (you may burn yourself before feeling returns)
- Skin may become blistered (do not break blisters)
- If skin is blue or gray, swollen blistered and feels hard and numb call 911 or get to a hospital ASAP.
## Hypothermia

| Caused by exposure to cold or immersion in a cold body of water. |
| Occurs when the body loses heat faster than it can be produced and body temperature goes below 95 degrees Fahrenheit. |
| Symptoms usually develop slowly may include uncontrollable shivering, slow or slurred speech, memory lapses, stumbling, drowsiness & exhaustion. |
| Seek medical attention immediately |
| Exhaustion, dehydration increase your risk of hypothermia. |

As we age our body’s don’t generate heat as they once did and it is less efficient in the nervous system issuing warning signs.  
Shivers is a way for the body to generate heat.  
Age also increases your susceptibility to hypothermia.
Hypothermia First-Aid

- Move the victim inside to a heated location and begin warming the center of the body first. If you can’t move them indoors insulate them from the ground and shelter them from the wind.
- Remove wet clothing and replace it with warm dry clothing and blankets.
- If the victim is unconscious administer CPR.
- Avoid
  - Warming the victim too quickly E.g. Heating lamp or hot bath.
  - Warming or massaging the limbs, as that can stress the heart and lungs.
  - Alcohol and tobacco products, as they interfere with circulation and hinders the rewarming process.

The reason you warm the center of the body first is because stimulation of the limbs can drive cold blood toward the heart and lead to heart failure.
Alcohol as a vasodilator enlarging blood vessels and gives the victim a false sense of warmth.

Warm the victim slowly.
Prevention

- Limit time spent outdoors in cold weather
  - Avoid alcohol consumption when going outdoors
- Wear warm clothing, using multiple layers if necessary
  - Wear mittens instead of gloves and well-fitting socks
- Avoid overexertion
  - Stay dry as possible
- Move indoors when you start shivering.
Vehicle:
- if you don’t have a meter visit an auto parts store to have your battery tested.
- Battery terminals and cable ends should be free from corrosion and the connections tight.
- Inspect belts for fraying or cracking it is recommended that belts be changed every 60,000 miles
- Inspect hoses and connection areas replace if the are cracked. Squeeze the hose and replace if they are brittle or spongy.
- Check that your tires are properly inflated and have good tread depth many tires have wear bars between the treads. Replace the tires if tread is even with the wear bar.
Resources:

- Safety (weather.gov)
- AAA's Winter Car Care Checklist
- Natural Hazards | Emergency Management | University of Nebraska Medical Center (unmc.edu)
- Frostbite: First aid - Mayo Clinic
- Hypothermia: First aid - Mayo Clinic
Severity (Total : 39)
Start Date: 10/1/2023 - Stop Date: 12/30/2023

- 0 Not Compensable (0.0%)
- 21 Report Only (53.8%)
- 5 Not OSHA Recordable (12.8%)
- 12 OSHA Recordable (Medical Beyond First Aid) (30.8%)
- 1 OSHA Recordable (Lost Time) (2.6%)