Meeting MINUTES

Chemical Hygiene Committee

Date | time 4/21/2022 2:00 PM | Location Zoom

## In Attendance

Mark Woods, Chemistry Professor (Chair)| Scott Jaqua, Asst. Director of EHS, RSO, CHO | Lindsay Henderson, Laboratory Safety Specialist | Kim Brown, Biology Professor | Jen Morse, ESM Professor | Drake Mitchell, Physics Professor | Becca Wilson-Ounekeo, ESM Lab Manager | Xavier Oberlander, Art Program Assistant | Kaleb Hood, Student Representative from MME (Jiao Lab) | Alexandra Franco, Laboratory Technician in Geology |Nic Meier, Chemistry Stockroom Manager (SRTC)| Special Guest: Brandon Barnhill, Compliance Officer |

## Absent

Shuvasree Ray, Chemistry Professor | Shannon Roth, Assistant Director of Research Integrity | Elliott Gall, MME Professor | Mike Wendel, Biology Teaching Lab Manager |

## Approval of 2/24/22 Meeting Minutes

Narrative:

* Mark asked the committee to review the meeting minutes from the previous meeting. The committee voted unanimously to approve the meeting minutes with no further changes.

## Lab Incidents Review

Narrative:

* There were nine incident reports this since the last meeting. A couple of these reports were for the same incident, but from an alternative perspective. The incidents and committee comments were as follows:
	+ The first incident involved a stainless-steel needle snapping under an inert atmosphere while dispensing n-butyl lithium. The end of the needle inserted into the n-butyl lithium bottle was quickly removed and submerged in a sand bath, and the portion of the needle still attached to the syringe was quickly removed and replaced with a new stainless-steel needle that had been placed in the glove box in the event it was needed.
		- Scott followed up on this event and learned that the needle used in this process was reusable, rather than disposable. The needle had been used before but it is unclear how many times it had been used before.
		- Mark also followed up on his concern hat the bottle was clamped during this procedure and it was. Possibly an SOP needs to be developed and inserted into the CHP related to this type of procedure.
	+ The second incident involved a student getting hit in the head with a laser cutter that was being worked with overhead. They lost their balance but no significant injury was reported.
	+ The third incident took place in the iStar lab space. Two different perspectives were reported on this incident. A piece of steel fell from approximately 20 feet while chains were being removed from the test subject. As a student was navigating around wires he slipped and grabbed the chain on the western side of the wooden frame, this caused the steel to be pulled to the western side of the frame. The steel piece was caught by a protruding rod on the eastern side of the wooden frame. As the students in the lab attempted to move the steel piece back into place the steel fell from the top of the frame (all individuals present were instructed to stand clear of the area in case of the object falling). All individuals working in the lab were unharmed and the only result of the incident was some damage to a nearby table.
		- There has been issues in this space in the past with supervision. An in-person meeting should have been held specifically about this project to run through the plan and properly prepare and check equipment beforehand. Hard hats should be worn at all times.
		- Time to inspect the components was not taken and therefore the proper tools were not used to safely disassemble the involved items in a safe manner.
	+ The fourth reported incident was related to property damage from a sprinkler head being hit by a hard hat on one of the construction workers in SRTC. Crew contained water with PVC leading to a trash can. Crew notified Skanska superintendent of the incident.
	+ The fifth incident also involved a contractor in SRTC. A worker rubbed up against some dusty ductwork with their bare arms. Worker developed a rash and was concerned that there was possible chemical residue on the surface leading to the rash.
		- There was follow up by Scott and Nic to determine if there was any chemical residue on the surfaces in that space. It was determined that there was not. However, this incident has led Skanska to get more nervous about the welfare of their employees working in SRTC and SB1. This will lead to HazCom training for their workers, as well as more appropriate apparel/PPE.
	+ The sixth incident involved a leak of an unknown biological substance (most likely blood) from a refrigerator/freezer on the 4th floor of SB1. It was not actively leaking when it was discovered by CPSO and the faculty member responsible for the refrigerator/freezer handled the cleanup.
		- This incident did prompt a more formal need for signage for lab refrigerators/freezers stored in hallways, as well as making sure they are all cataloged with the moves team. The template for contact information was created and distributed to members of SB1 by the Moves team.
	+ The seventh incident was not directly related to a situation inside one of the science/engineering buildings, but it did involve possible incompatible chemical cleaning solutions being mixed that created a strong odor in a parking structure stairwell.
	+ The final incident took place in one of the biology teaching labs in RLSB. A may have transferred a bit of one of the test solutions from the ammonia/nitrate/nitrite kit from their glove onto their wrist (they don't remember exactly which test solution it was). They washed the affected area thoroughly and did not noticed any irritation.
		- Solutions contain: #1: polyethylene glycol (up to 60%), sodium nitroprusside solution (1-10%), sodium salicylate (1-10%), #2: hydrochloric acid (up to 14%), #3: sodium hydroxide (up to 10%), sodium hypochlorite (up to1 %), #4: polyethylene glycol (98%), sulfanilamide (up to 5%)
	+ Somewhat unrelated incident, there was a plumbing leak in a RAD contaminated sink in SRTC. Scott reiterated that it is important that if something like this happens that it is reported so that it can be handled ASAP.

Action Items:

* An SOP needs to be created to add into the CHP related to working with syringes/needles and highly reactive substances under inert atmospheres.

## Labeling Standards and Storage Document Discussion

Narrative:

* It was determined at the previous meeting that there was some wording already written for this section and currently is accessible through the CHP website. It was also noted that this wording was created to be temporary. The updated document presented to the committee would replace the wording on the CHP website, if approved.
* The committee read through the document and discussed a few items to add.
	+ Specifying short versus long term labeling was determined to be helpful.
	+ Adding an example for special circumstances that may need unique labels was added to the document.
* It was unanimously voted to approve the new labeling standards by the committee.

Action Items:

* Lindsay will add the updated labeling standards document to the CHP website and remove the old wording.

## Exposure Monitoring Section Discussion

Narrative:

* The committee looked over the exposure monitoring section being proposed for addition to the CHP.
	+ It was requested that SHAC’s info be added as a resource under this section.
	+ It was also requested that “physician” be replaced by “medical professional”.
	+ Specifying that a first aid kit is required was added.
* The committee unanimously voted to approve and add this section the CHP website.

Action Items:

* Lindsay will add this section to the CHP website.

## Record Keeping Section Discussion

Narrative:

* The committee reviewed the record keeping section being proposed for addition to the CHP.
	+ There was a concern about the faculty leads having to maintain training records. Training records (for the “working safely in a lab” training at least) will soon be available to all faculty leads through EHS Assistant.
* The committee unanimously voted to approve and add this section the CHP website.

Action Items:

* Lindsay will add this section to the CHP website.

## Other Items

Narrative:

* The committee will review and vote on the emergency preparedness section at the next meeting.

Action Items:

* All committee members should review this section and come with comments prepared for the next meeting.

## Next Meeting

5/12/2022 2:00 PM, Zoom