

COMMITTEE MINUTE FORM

See instructions



Labour and Immigration
 Workplace Safety & Health
 401 York Avenue, Winnipeg, Manitoba R3C 0P8
 T 204 957-SAFE(7233) or
 toll-free 1 855 957-SAFE(7233) F 204 948-2209

Complete Name and Address of Workplace UWSA Day Care 548 Furby Place R3B 2T4 OR30 – 515 Portage Ave. Winnipeg MB R3B 2E9 (mailing address) Phone: 204-786-9898 Fax: 204-775-4309 Meeting date: January 15, 2025 Date of next meeting: April 8, 2025 Number of employees at the workplace: 38	Employer Members (list all) Ioulia Berdnikova Magdi Bogos	Occupation Executive Director Supervisor	Present X X	Absent
	Worker Members (list all) Rhoda Jamandre Jannette Yabut Elena Kuznetsov Arlene Talastas	ECE II CCA ECE II ECE III	X X X X	
	Guests (list any)			

Date of Origin	Concern or Problem (See reverse for completion instructions)	Recommendation or Action To Be Taken	Action By (who & when)
	<p><i>The minutes of the committee meeting held on October 8, 2024 were reviewed and it was found that all concerns and problems were satisfactorily resolved accept:</i></p> <p><u>Outstanding Problems</u></p> <p>Require additional emergency exit doors connecting through room 3 and room 4 to exit to foyers.</p> <p><u>New Concerns and Problems</u></p> <p>Counter tops in PS 4 rooms are wearing out and dirt accumulating in cracks.</p> <p>One children’s sink in PS room is not operational due to not working sensor.</p> <p>One light fixture in PS3 is missing a cover.</p> <p>Carpet in PS3 is wearing out and become a tripping hazard.</p> <p>2 small wooden tables in PS 3 have wobbly legs.</p>	<p>Request to the UofW was submitted, UWSA and daycare’s Management Committee were informed. The item is on UofW agenda. University hope to complete it by March 31, 2025.</p> <p>Look for possibility to replace two counter tops.</p> <p>Contact Physical plant to replace batteries.</p> <p>Contact Physical plant to replace a light cover.</p> <p>Purchase a new carpet.</p> <p>Tighten up screws for the legs.</p>	<p>UofW</p> <p>Ioulia</p> <p>Ioulia</p> <p>Ioulia</p> <p>Ioulia</p> <p>Ioulia</p>

Other Business:

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.

(X) Print name of Employer Co-Chair I. Berdnikova () Print Name of Worker Co-Chair A. Talastas

Signature _____ Signature _____

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Complete Name and Address of Workplace UWSA Day Care 548 Furby Place R3B 2T4 OR30 – 515 Portage Ave. Winnipeg MB R3B 2E9 (mailing address) Phone: 204-786-9898 Fax: 204-775-4309 Meeting date: Dec 18, 2023 Date of next meeting: March 2023 Number of employees at the workplace: 35	Employer Members (list all) Ioulia Berdnikova Magdi Bogos	Occupation Executive Director Supervisor	Present X X	Absent
	Worker Members (list all) Rhoda Jamandre Jannette Yabut Ivy-Lyn Reynoso Arlene Talastas	ECE II CCA ECE II ECE III	X X X X	
	Guests (list any)			

Date of Origin	Concern or Problem (See reverse for completion instructions)	Recommendation or Action To Be Taken	Action By (who & when)
	3 small blinds are broken in PS 1.	Contact blinds ambitious for repair/ replacement of blinds.	Ioulia
	Trampoline’s handle is broken (PS6).	Contact Physical plant for the possibility to fix the handle. Otherwise, to replace a trampoline.	Ioulia
	Window in PS6 is broken due to vandalism.	Window is on order	UofW
	Finger guards in Infants 1 and 2 rooms are broken (entrance doors on the outside).	Replace finger guards	Ioulia
	There is a big crack under the window in Infant 1 room and some painting job in PS 1 room.	Contact facilities for repair.	Ioulia
	Floating shelf in Infant 3 room is overloaded what is causing potential falling hazard.	Remove heavy items from the shelf.	Arlene
	Mats in Infant room 3 are wearing out.	Replace / fix damaged mats.	Magdi
	Arrange Mental health presentations with Manulife and Safety Services Manitoba		Ioulia

Other Business:

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.

(X) Print name of Employer Co-Chair I.Berdnikova () Print Name of Worker Co-Chair A.Talastas

Signature _____ Signature _____



See instructions

**SAFETY AND HEALTH
 COMMITTEE MINUTES**

Home page: <http://www.safemanitoba.com> Click on "Minute Form" in PDF format to print and fill in your meeting information outlined below (Instructions for Completion of Minute Forms) for faxing or mailing. If you prefer to email your completed minute form, use the Word format and forward to cominutes@gov.mb.ca
FAX for Committee Minutes: (204) 948-2209

Your committee must meet four or more times per year. Completed minutes of each meeting of the safety and health committee at your workplace must be faxed, mailed to Workplace Safety and Health or e-mailed to cominutes@gov.mb.ca. You can use the Workplace Safety and Health Committee Minute Form or set up your own format containing all the information in our form.

The minute form is intended for your use to record briefly and clearly the safety and health concerns at your workplace and steps taken by the committee or others to resolve them. They are designed to provide everyone at your workplace and the Workplace Safety and Health with information on your committee's activities and progress to date.

If you are unable to resolve an issue yourselves, call Workplace Safety and Health for assistance at 204 957-SAFE(7233) or toll-free in Canada at 1 855 957-SAFE(7233) for assistance.

Instructions For Completion Of Minute Forms

1 You must complete all information in top boxes:

Full Name & Full Address of Workplace - must include Department & Branch, where applicable.

Which Committee - needs to be completed only if you have more than one committee at the same address.

Number of Employees at the Workplace - the number at the workplace, not the number on the committee.

- 2 In the first column "**Origin**" indicate the date an issue is first raised at a safety and health committee meeting. Continue to note this date in future minutes until the committee agrees the issue is resolved.
- 3 In the second column "**Concern or Problem**" list the details of items discussed. Draw a line across the page to separate each issue.
- 4 In the third column "**Recommendation or Action Taken**" indicate what has been done or the steps being taken or the committee's recommendation as to what should be done to resolve the issue.
- 5 In the last column "**Action By**" fill in who will be responsible for carrying out each interim step or action and the date it will be completed or, if the issue is resolved, fill in the date it was resolved.
- 6 In the bottom section "**Other Business**" record any points not covered such as upcoming elections or date of next meeting.
- 7 **Both** management and worker co-chairs must sign each page of the minutes when they are satisfied that the record is complete and accurate. Please indicate by an (X) in the brackets who chaired that particular meeting. NOTE: If you are emailing your minutes then you are only required to provide the names of the two co-chairs.
- 8 Distribution of copies must be done within one week following the committee meeting:
 - a) Distribute copies to committee members, alternates, and relevant managers.
 - b) Keep one copy at the workplace for a period of at least 10 years from the date of the meeting.
 - c) Send one copy to Workplace Safety and Health - by mail to the address above, fax minutes to (204) 948-2209, e-mail to the above address or electronically.
 - d) Post one copy on the safety and health committee bulletin board(s).

SETTING AGENDAS: It is recommended that the co-chairs get together to set the agenda for each meeting. This must be posted on the safety and health committee bulletin board **prior** to each meeting and distributed to committee members **at least 3** clear days ahead of the meeting. Following is a generic agenda outline that could be used in creating your own agendas.

- 1 **Review minutes of last meeting.** You will need to determine if all issues have been resolved or if actions have been taken as indicated and next steps agreed to and noted.
- 2 **Review issues resolved by individual committee members or supervisors.**
- 3 **Review illness, injuries and accidents since last meeting.** This could also include a brief review of working procedures, rules and policies related to the illness, injuries or accidents and recommendations for changes to same.
- 4 **Consider new concerns or problems.** These may arise out of inspection tours, surveys, investigations by committee or concerns brought to the committee's attention by employees or management.
- 5 **Review of educational material and availability of safety and health training programs.**