Laboratory inspections are required by the Occupational Safety and Health Act (OSHA) Laboratory Standard and serve as key elements of the New York Medical College (NYMC) policy to ensure a safe, healthy working environment is provided for students, faculty, staff and visitors. Laboratory supervisors have the responsibility of maintaining their laboratory area in a manner that controls hazards and minimizes risk.

Inspections shall be scheduled, so as to not disrupt laboratory activities. Under certain circumstances such as a filed complaint or an OSHA violation, an unannounced laboratory inspection may occur. The inspection results will be documented and distributed to the appropriate persons. The success of an inspection program depends on the completeness of the follow up; therefore documentation will improve the program by providing a written tracking system to monitor the correction of health and safety deficiencies.

Focused safety inspections of all laboratories shall be conducted semi-annually for the year 2002 with a primary focus (first six month period) on reviewing laboratory chemical inventories, corresponding MSDS, chemical storage and labeling, and the handling of chemical waste. A secondary focus (second six month period) will be a review of the required health and safety training for laboratory personnel.

In subsequent years, the plan is to conduct comprehensive safety inspections on a quarterly basis.

2.0 Purpose

This protocol is intended as a guide for planning and conducting a laboratory safety inspection. The purpose of the inspection is to emulate the audit procedures of OSHA and the Environmental Protection Agency (EPA). By conducting laboratory inspections, the Department of Environmental Health and Safety hopes to promote compliance with all regulations, thereby protecting NYMC personnel from health hazards and regulatory citations.

The overall goal of the inspection program is to make laboratories and their occupants safer for teaching and research while giving the Principal Investigator (P.I.) as much control over the
process as is possible. The anticipated outcome of the inspection process is to improve safety performance, over time, with reduced regulatory and injury accident/risk.

3.0 Laboratory Self Inspections

The Department of Environmental Health and Safety recommends that laboratories conduct monthly self inspections. A laboratory self inspection form (See Appendix A) will be distributed to each laboratory Principal Investigator. Prior to the initiation of the Department of Environmental Health and Safety inspection process, the completed self inspection forms will be collected and reviewed to allow for the establishment of a baseline survey of each laboratory (See Appendix A). The Principal Investigator should complete the form on a monthly basis.

4.0 Notice of Laboratory Inspection

Prior to the inspection of a laboratory, a Notice of Laboratory Inspection Memorandum (See Appendix B) will be hand delivered to each P.I. and/or Administrator. The notice will inform the P.I. of an upcoming inspection and outline the evaluation criteria and applicable regulations to be reviewed. A response to the letter will be requested, so a convenient date and time can be set for the inspection of each laboratory. If a response is not received within one week, a follow up letter will be issued to the P.I. which specifies a specific date for his/her laboratory inspection.

4.1 Laboratory Inspection

The laboratory inspection will involve:

a. Meeting with the P.I. or designated staff member to discuss the specific work performed in the laboratory, the people working in the laboratory, and the types of materials and procedures used.

b. Surveying the laboratory based on the pre-set criteria outlined in the Notice of Laboratory Inspection Memorandum, using either the Comprehensive Laboratory Inspection Form (See Appendix C) or focused variations of the form. For comparison purposes, the form includes a point based system for grading the laboratory. The total score of each laboratory will be documented on the Laboratory Inspection Form.

c. Answering any questions the P.I. or designated staff member may have regarding the inspection and informing them that a written report of the inspection findings will be forwarded to them in the near future with a copy to the Department Chairpersons and Administrators.
4.2 Laboratory Inspection Report

Each laboratory inspection will be documented and written records will be maintained to aid in the identification of hazards, as well as recurrent problems in the laboratory. The results will be documented in a Laboratory Inspection Report (See Appendix D) which will outline the rate of compliance with each specific criterion focused on in the inspection. The report will be numbered as follows: Laboratory Room #- 0001. The inspection report will include all applicable standards/regulations for each area surveyed. Site specific corrective actions necessary to bring the lab into compliance will be included. The status of each report will be either closed, if there are no necessary corrective actions or remain open if areas are in need of improvement. Copies of the report will be given to the Department Chairperson, Administrator, Principal Investigator of each laboratory and the Director of Environmental Health and Safety. A summary of the laboratory inspection reports will be distributed to the Dean.

4.3 Response to Inspection Report

A written response to the report will be forwarded to the Department of Environmental Health and Safety within 10 days after receipt of the inspection report, in which the P.I. outlines what corrective actions, if any, have been taken or will be taken to bring the laboratory into compliance with all applicable regulations.

When the corrective action has been completed, it shall be the responsibility of the P.I. to provide a written report of such action within 10 days to the Department of Environmental Health and Safety.

4.4 Follow up/Re-Inspection

If a laboratory is found to be deficient, it will be pointed out to the P.I. or designated staff member who accompanies the Environmental Safety Assistant during the inspection.

If there is a need for corrective action in any laboratory, the P.I. will adhere to the below time table to be in compliance.

a. Life Threatening Risk Immediate corrective action is required.
b. Serious Risk (Potential Hazard) Corrective action is required within two days.
c. Needs Improvement Corrective action is required within ten days.

In general, the plan is to schedule the re-inspection of laboratories one week from the date the Department of Environmental Health and Safety receives the Principal Investigator’s written response, indicating the necessary corrective action(s) have been completed. The re-inspection
results will be documented on a follow-up Laboratory Inspection report. The report will be numbered the same as the original report, but an “R” will be added to denote the re-inspection. (i.e., Lab Room#.0001R)

5.0 Responsibilities

Environmental Health and Safety Department

The Department of Environmental Health and Safety is responsible for maintaining and implementing the Laboratory Inspection Protocol. To accomplish this:

a. The Environmental Safety Assistant will maintain a current Laboratory Inspection Protocol with all applicable standards and regulations.

b. Scheduled inspections plan to be conducted.

c. Written reports and documentation will be completed and distributed to Department Heads, Administrators and Principal Investigators. Summary reports will be distributed to the Dean.

d. All documentation and records will be maintained by the Department of Environmental Health and Safety.

Department Chairperson

The Department Chairperson is responsible for establishing and maintaining compliance with all applicable regulatory standards. He or she is also responsible for reviewing all Laboratory Inspection Reports that pertain to their department laboratories and providing any necessary feedback to Principal Investigators and the Department of Environmental Health and Safety. To this end, a Department Chairperson may wish to designate safety officers within the departments. A designated safety officer should hold the rank of associate professor or full professor.

The Department Chairperson is also responsible for reporting unsafe acts, conditions or inadequate facilities to the Department of Environmental Health and Safety.

Principal Investigator

The Principal Investigator (Laboratory Supervisor) has the overall responsibility for regulatory compliance in his or her laboratory. This responsibility may not be shifted to inexperienced or untrained personnel. These responsibilities include

a. Completing the Laboratory Self Inspection Form for his or her laboratory.
b. Meeting with the Environmental Safety Assistant, or designating a laboratory staff member to meet with him/her to walk through the laboratory during inspections to discuss any findings.

c. Reviewing the Laboratory Inspection Report and implementing corrective actions as prescribed by the written Laboratory Inspection Report and respond in writing to the Department of Environmental Health and Safety regarding the steps taken to bring the laboratory into regulatory compliance.

d. Reporting unsafe acts, conditions, or inadequate facilities to their Chair/Director, Departmental Safety Officer or the Department of Environmental Health and Safety.

Individual Laboratory Workers

Individual laboratory workers are responsible for:

a. Assisting the Environmental Safety Assistant during the laboratory inspection by answering questions regarding laboratory operations.

b. Reporting unsafe acts or conditions to their Principal Investigator, Chair/Director, Department Safety Officer, or the Department of Environmental Health and Safety.