## **SAFETY FOCUS**

## **SAFETY INSPECTION PROCESS**

Laboratories and other spaces with hazardous materials or conditions are periodically inspected by EHS. The safety inspection process is managed through the SAM (Safety Administrative Management) system.

**WHO:** Principal Investigators (PIs), Core Facility Directors, teaching lab managers, field station managers, and shop managers/supervisors responsible for laboratories and other areas with hazardous materials or conditions are subject to periodic inspections of their space by EHS. Inspections are managed through the SAM system.

WHAT: The safety management process involves(1) SAM registration and profile completion, (2)chemical inventory upload and review (as necessary),(3) upload of other required safety documentation,

(4) self-inspection, and (5) periodic
EHS inspection. The self-inspection is assigned through
SAM in preparation for an upcoming
EHS inspection.
Once the selfinspection is
complete, the EHS



inspection is scheduled and conducted by a multidisciplinary EHS safety team to increase the efficiency of the inspection process. All safety deficiencies, violations, and areas of improvement are discussed with the area supervisor at the completion of the inspection and tracked in the SAM system.

**WHEN:** Spaces registered in SAM will be inspected by EHS at least once in 2021. In the future, the inspection frequency will be dictated by the hazards and risks present in each space; for example, laboratories subject to IACUC protocols are inspected twice each year. **WHY:** Periodic inspections are necessary to confirm regulatory compliance and document the effectiveness of campus safety policies and procedures. Results of inspections are not considered punitive or disciplinary, but are instead intended to improve safety and demonstrate regulatory compliance. The findings of on-site inspections are used as important metrics regarding safety culture and performance.

## Escalation Process for Safety Deficiencies and Incomplete Items

- Safety deficiencies are tracked through a defined corrective action process in SAM, with the expectation that they will be addressed within a defined time period.
- If there is no response/correction of the deficiency/violation within the established deadline, an email is sent to the cognizant Dean/Director, with a copy to PI/Area Supervisor, with a request for assistance and a second deadline established.
- If there is no response/correction of the deficiency/violation past the second deadline

   escalation to VPR with copy to Dean/
   Director and Pl/Area Supervisor. The area
   Pl/Area Supervisor is given three business
   days to respond with a corrective action plan
   which includes target completion dates.
- No response/correction past the three days

   request sent to VPR for closure of lab/shop/ area.

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