

 **West Texas A&M University**[™]
ACADEMIC RESEARCH ENVIRONMENTAL HEALTH AND SAFETY
STANDARD OPERATING PROCEDURES

SOP No. 24.01.01.W1.32AR Laboratory Inspection Procedure

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Environmental Health and Safety (EHS) at WTAMU is composed of two distinct but integrated environmental safety departments that report to the Vice President of Research and Compliance. Academic and Research Environmental Health and Safety (AR-EHS) is responsible for research and academic related compliance, which includes laboratory and academic research and the associated compliance committees. Fire and Life Safety (FLS-EHS) is responsible for fire related compliance and conducts fire and life safety inspections of campus buildings and assists with the testing all fire detection and suppression systems.

Supplements [TAMUS Regulation 24.01.01](#)

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1. Purpose

The purpose of this procedure is to enhance safe laboratory work practices within the WTAMU research community with the goal to provide a safe work environment for users of WTAMU laboratories and to ensure compliance with state and federal safety regulations.

2. Scope

This procedure applies to all WTAMU laboratory spaces.

3. Procedures

The EHS Lab Inspection process includes the following components:

- **Announced Inspections (once per year).** EHS inspectors will carry university identification associating them with the university. EHS inspectors will announce themselves at the beginning of a lab inspection and attempt to identify a safety representative from the lab to ask questions and share results. They may communicate with any lab personnel during the inspection. EHS inspectors may photograph areas of concern or commendation in laboratories and ask for a list of all lab personnel to verify training history. Furthermore, inspectors will interact with lab personnel to discover any additional questions or support needed to improve lab safety and research compliance.
- **Unannounced Inspections.** Periodic unannounced inspections of teaching and research laboratories will be conducted to help students, faculty, and staff in their support of laboratory safety guidelines and protocols. Unannounced inspections will be conducted by EHS inspectors or Risk Management or, potentially, an EHS invited ombudsman with research compliance expertise. Inspection documentation will be filed in the office of EHS.
- **Follow-up Inspections.** Laboratory safety inspection reports will be shared with the responsible laboratory personnel, faculty, and/or researchers as well as the respective department head and/or dean to ensure that all responsible parties are aware of the safety issues or commendations identified. In the event corrective actions are identified, follow-up actions will be implemented until all corrective actions are properly addressed.
- **Laboratory Close Out.** To ensure appropriate laboratory close out, the principal investigator or departmental administrator should contact EHS as soon as the need for lab evacuation is determined (preferably three months prior to exit). EHS will conduct a close-out inspection. PIs need to have all compliance related items closed, transferred, or amended prior to the close out inspection. Trash and hazardous materials need to be clearly identified and ready for removal. Animals must be transferred or euthanized prior to the close out inspection. Target dates for critical steps will be mutually agreed upon and appropriate procedures put in place. All components listed on the laboratory close-out form must be completed, with required signatory verification, as part of the principal investigators university exit process. The close-out form must be filed with the office of EHS.
- **Laboratory Check-In.** To ensure appropriate laboratory check-in, the principal investigator or departmental administrator should contact EHS as soon as the need for a lab is determined (preferably three months prior to check-in). EHS will conduct a check-in inspection to ensure the laboratory space is adequate for the intended use. Additionally, EHS will inform the laboratory PI of applicable procedures regarding the intended work. Target dates for critical steps will be mutually agreed upon and appropriate procedures put in place. All components listed on the laboratory check-in form must be completed, with required signatory verification, prior to the principal investigator utilizing the laboratory. The check-in form must be filed with the office of EHS.
- **Referral Inspections (As needed).** When significant non-compliance, unsafe, or unhealthy conditions are reported, or incidents occurring in the laboratory are reported, inspections will immediately be conducted by EHS.
- **Annual Chemical Inventory.** Includes updating the chemical inventory as well as reviewing and segregating chemicals as appropriate. Chemical inspectors will note any unsafe laboratory conditions in either an announced or unannounced inspection and laboratory PIs will be made aware of any corrective actions through the normal notification system (IndustrySafe).

In addition to collaboration with EHS announced and unannounced inspections, laboratory PI's are responsible for implementing, maintaining, and monitoring safe laboratory conditions, including those procedures set forth in TAMUS policy and regulations, WTAMU rules and procedures, and related state and federal regulations.

4. Compliance

Compliance with University policy is addressed in the faculty handbook, General Policies Affecting Faculty, 07.01. If a teaching and research laboratory is found in a condition which fails to meet established minimal standards for safety, the PI will be assigned a corrective action in the inspections software (IndustrySafe). The inspection software automatically generates an email notification to the PI of the laboratory space which includes the deficiency, recommendations to achieve minimal safety requirements, and a timeline to address the condition. In the event a PI takes no action to correct the documented condition, EHS will seek support from the Department Head. If no action continues then the Dean will be notified, followed by the Vice President of Research and Compliance, and lastly the President/CEO.

5. Records Retention

No official state records may be destroyed without permission from the Texas State Library as outlined in [Texas Government Code, Section 441.187](#) and [13 Texas Administrative Code, Title 13, Part 1, Chapter 6, Subchapter A, Rule 6.7](#). The Texas State Library certifies Agency retention schedules as a means of granting permission to destroy official state records.

West Texas A&M University Records Retention Schedule is certified by the Texas State Library and Archives Commission. West Texas A&M University Environmental Health and Safety will follow [Texas A&M University Records Retention Schedule](#) as stated in the Standard Operating Procedure [61.99.01.W0.01 Records Management](#). All official state records (paper, microform, electronic, or any other media) must be retained for the minimum period designated.

6. Training

West Texas A&M University Environmental Health and Safety will follow the Texas A&M University System Policy [33.05.02 Required Employee Training](#). Staff and faculty whose required training is delinquent more than 90 days will have their access to the Internet terminated until all trainings are completed. Only Blackboard and Single Sign-on will be accessible. Internet access will be restored once training has been completed. Student workers whose required training is delinquent more than 90 days will need to be terminated by their manager through Student Employment.

7. PI and EHS Findings

In the event that marginal or unsafe conditions are identified in the laboratory, it is the PI's responsibility to terminate those activities deemed unsafe until appropriate remediation has been implemented. In many cases the PI will be able to remedy the unsafe condition; however, if additional assistance is required, the PI will notify EHS immediately for assistance.

Contact Office

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