Protecting MU's Health, Safety, and the Environment **Spring 2006**

notes

ENVIRONMENTAL HEALTH and SAFETY

In This Issue

Emergency Preparedness at MU

Tornados, hurricanes, pandemic influenza, bioterrorism. With all sorts of emergencies seemingly presenting an ever present danger, people often wonder if the campus is prepared. More specifically, does MU have a Campus Emergency Plan? What should I as an individual do in the event of an emergency? This article will answer these and related questions.

To begin with, MU does indeed have a Campus Emergency Plan. In fact, the Campus has had such a plan going back many, many years. The current plan was the result of a major update several years ago and was prepared with the input of many campus departments and with the assistance of experts from the MU Fire and Rescue Training Institute. The Plan identifies a variety of potential natural and man-made disasters and provides a structure for how the campus would respond. Not surprisingly, emergency responsibilities are to parallel day to day responsibilities as much as possible; after all, we want people doing the jobs they are trained for. The plan contains inventories of various types of resources, with lists of contacts of persons responsible for various aspects of the plan.

Perhaps most importantly, there are alternative contacts, in case indicated contact persons are unavailable.

A number of campus units (e.g. Hospital, Research Reactor, IATS, Athletics and others) have prepared emergency plans to meet their specific needs. At the building level, virtually all campus buildings have a building-specific emergency action plan. These building plans address such issues as when and where to seek shelter, and when to evacuate. For more information about the emergency plan for the building where you work, contact the Building Coordinator.

Another significant campus resource is MUAlert (http://mualert.missouri.edu). MU has developed this web site as a resource not only for members of the campus community, but also for parents of students and others outside MU who have an interest when an emergency is impacting the University.

EHS has prepared guidance materials on its web site (http://ehs.missouri.edu/other/er/). Here you will find more specific guidance for various types of emergencies, plus a link to the EHS Emergency Procedures poster.

Feel free to contact EHS if you desire assistance in addressing emergency preparedness issues at your work location.

Peter Ashbrook
Director

Director's Desk

Roles and Responsibilities

EHS has been preaching the message that Supervisors and Principal Investigators are the persons with primary responsibility for safety: for assuring that there are safe work practices and the people who report to them follow appropriate procedures. Students, employees, and visitors have responsibility for understanding the potential hazards in their work or teaching environments, and to bring unsafe conditions to the attention of someone who can respond. The vast majority of the campus community understands these responsibilities.

Where then, does EHS fit into the safety picture? We are the campus resource—your resource—to help you meet your safety responsibilities. We have developed a number of guidance manuals; provide training to thousands of individuals each year; monitor campus locations for compliance and safety performance; manage biological, hazardous, and radioactive materials; provide hazard assessments to meet specific needs; and interface with regulatory agencies.

On occasion, EHS brings in outside consultants to either review specific campus compliance programs or to provide services to meet needs that EHS is unable to provide. This semester, many of you are aware that we brought in biosafety and radiation safety consultants. Thanks to an initiative at the System level, we also have a loss control consultant who is helping enhance general safety programs in various departments. If you have the chance to interact with these individuals in the future, feel free to take advantage of their expertise and be thoroughly open with them about program issues and needs.

One of the issues that surfaces periodically is the administrative burden placed on the campus community due to safety and compliance programs. We are aware that time spent on safety and compliance takes away from time that could be spent on teaching and research. Please remember that serious accidents, spills, and fires can also disrupt teaching and research. Attention to safety tends to have a beneficial impact on the quality of work. We are continuing to look for ways to make it easier for you to do business with EHS; feel free to send suggestions my way if we appear to be overlooking any obvious opportunities.

Peter Ashbrook

Radioactive Material Security

EHS reminds all users to maintain a high level of alertness to radioactive material security matters. During the past few years, the Nuclear Regulatory Commission (NRC) has made it clear that security of radioactive materials is their number one priority. Security concerns apply to **ALL** radioactive materials (including waste) regardless of quantity.

What is being done? Radioactive materials must be locked up or overseen by a person who knows they are responsible for security. For more information see page 42 of the Radiation Safety Manual. To facilitate material control and security, EHS maintains accurate inventories of all radioactive materials on campus.

Additionally EHS is working with members of the Radiation Safety Committee on implementing a new Security and Awareness Program. A subcommittee has been formed to determine whether additional polices or measures are needed to address NRC concerns.

Who is responsible for security? Every person who has access to radioactive materials has the responsibility to keep the material from unauthorized access or removal. This includes Radiation Workers, Authorized Users, and (Continued on page 3)

Packaging Sharps for Disposal

The best way to handle laboratory sharps to prevent cuts and sticks is to minimize contact with sharps. That means disposing of them immediately after use. The first step is to obtain an appropriate sharps disposal container. These containers are closable, puncture resistant, leak proof on the sides and bottoms, and available in 1-quart, 2-gallon, and 8-gallon sizes. Sharps disposal containers must be easily accessible to laboratory personnel, labeled and located as close as feasible to the area where sharps are used. Puncture-proof sharps containers are available from University Hospital Materials Management (882-2805) or commercial sources. To dispose of laboratory sharps, place full containers in the cardboard or red plastic biohazard containers. Contact EHS for guidance on how to dispose of radioactive sharps.

As is the case with uncontaminated broken glass, disposal of uncontaminated plastic pipette tips is not restricted. These items can be disposed of as regular waste after placement in a container which will eliminate the potential of punctures and cuts to solid waste handlers or the public. Suggested containers are the pipette shipping container, sturdy sealed cardboard boxes and plastic containers with sealable caps or lids (i.e. clean bleach, milk and plastic bottles). Do not use plastic bags or glass containers to dispose of pipette tips.

Personal sharps such as syringes, hypodermic needles, or similar medical items that can be defined as a "sharps" must be handled in this manner:

1. Use a puncture-proof plastic container with tight-fitting screw top, such as a bleach bottle. Don't use glass because it can break. Coffee cans are not recommended because the plastic lids come off too easily. Alternatively, you may purchase a red sharps container at local pharmacies.

2. Label the container clearly as "Contains Sharps" with a waterproof marker either directly on the container or on masking tape on the container.

3. Once a syringe or lancet is used, immediately put it into a container. Screw on the top. Don't clip, bend or recap the needles because of potential injury to yourself.

4. Store in a desk drawer or closet. Remove the container when 2/3 full. Screw on the cap tightly. Seal it with heavy duty tape to be extra safe.

5. The full container must be disposed with your home trash, not in the university black trash bags, biohazard boxes or red tub disposal system.

Additional information on sharps is available at http://ehs.missouri.edu/bio/manuals/biosafety.pdf

Roy Parsons
Biological Safety Professional

Radioactive Materials Security Cont.

Ancillary Workers. Persons who don't actually work with radioactive material but are left in charge of a room or area with unsecured radioactive material, must receive appropriate safety and security training. Note that the Authorized User is ultimately responsible for making radioactive material secure by assuring either that it is locked up when no one is around or that it is in the constant line of sight of a trained individual.

What can you do? Ensure material is locked and secured at all times when the material is not in use. Prevent unauthorized people from gaining access to the material. Ask people you don't know if you can help them (question individuals who do not work in your lab). Do not hesitate to ask for identification.

Security requires a continual effort from everyone to ensure control of radioactive material. As always, we appreciate your help and cooperation. If you have specific questions concerning security matters in any of your labs, please ask one of the Radiation Safety Staff in EHS.

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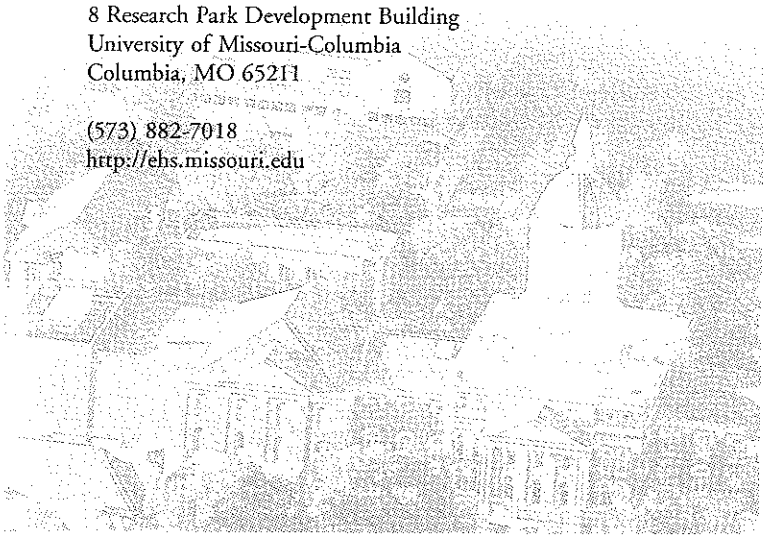

Electronic Waste (E-Waste)

For years many have known that CRT computer monitors must be managed in an environmentally friendly way to keep their hazardous components out of our landfills, but fewer know that other electronic wastes can contain harmful compounds. Recently, both the University, via the Business Policy and Procedure Manual (BPPM), and the State, via the Department of Natural Resources (DNR), have begun to address the issue.

What Do I Need To Do Now?

University policy can be found in BPPM 13:160 and addresses computer systems which "include but are not limited to desktop and laptop computers, servers, personal digital assistants (PDAs), and cell phones that are also PDAs." While the policy is actually designed first to address security of information that may be on the computer – it also allows the University to centralize management of these e-waste items through Surplus Properties. Each computer system must be cleaned of all electronic data. See your departmental IT professional for assistance with this process. The system must then be sent to Surplus Properties along with Form UM-27.

Will This Guidance Be Changing?

DNR, which expects to have finalized guidance in about 12 months, is currently proposing their definition of Electronic Waste to include computers (including all the University has already defined above), computer peripherals (including monitors, keyboards, mice, printers and scanners), cell phones, and televisions. DNR's proposal specifically excludes white goods (appliances), microwave ovens, smoke detectors, VCRs, and DVD players. The state has not made a decision on radios, stereos, and other consumer electronics. Both Surplus Properties and EHS are participating in the state process to formulate new guidance. Any changes in managing computer systems that may arise as a result of new procedures from DNR can be quickly implemented by the system already in place. If new procedures from DNR result in new materials that must be managed differently, EHS will take the lead in communicating this change to campus. In the meantime, the campus computer system policy must be followed.

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EHS appreciates campus support of environmental and safety issues. If you have any special needs regarding the format of this publication, or have any comments regarding newsletters, training programs or services, please direct your communications to Rebecca Bergfield, Editor at the above address.