

June 9, 2022

Environmental Health and Safety

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Ms. Catherine Provencher Chief Administrative Officer and Vice Chancellor for Financial Affairs and Treasurer University System of New Hampshire 5 Chenell Drive, Suite 301 Concord. NH 03301

RE: USNH Environmental Health and Safety Annual Report

Dear Ms. Provencher,

I am pleased to forward you the USNH Environmental Health and Safety Report for 2021. The Board of Trustees (BOT) Operation and Maintenance of Property Policy (VI.F.1.1.3) calls on the Presidents, in collaboration with the Chancellor, to establish procedures to ensure the prudent management of environmental health and safety in compliance with applicable state and federal laws. Those procedures shall include coordination with a Council on Environmental Health and Safety with representation from each component institution. These procedures shall also include, where appropriate, a mechanism for measuring compliance through appropriate means including periodic environmental audits. The Chancellor shall coordinate presentation to the Audit Committee of an annual report describing the state of the University System's environmental health and safety efforts at each institution, including the findings of any environmental audit conducted during the reporting period.

The Council prepared this Annual Report following the elements and objectives stated in the USY Administrative Board Operation and Maintenance of Property Policy (VI.F.3.3.3). The Annual Report contains a summary of compliance status for each component institution, individual campus environmental health and safety reports and a comparison of institution specific compliance progress spreadsheets for 2019, 2020 and 2021.

Please do not hesitate to contact me if you require any additional information.

Sincerely,

Andy Glode, UNH, and Chair
USNH Council on Environmental Health and Safety

Cc: Peter Conklin, GSC

Ralph Stuart, KSC Katie Caron, PSU Lorna Jacobsen, USNH Ashish Jain, USNH

#### **Executive Summary**

#### **University System of New Hampshire**

#### **Annual Report 2021**

This report details USNH Environmental Health and Safety (EHS) program activities for 2021 and presents operational data that represents EHS management efforts conducted by USNH EHS Offices and other University collaborators.

2021 saw a continuation of efforts to manage disruptions caused by the COVID-19 pandemic. Additionally, USNH institutions were challenged with a high number of retirements and resignations; this staffing disruption affected EHS programs directly as experienced staff retired or resigned, and indirectly as talented faculty and staff who helped maintain a culture of safety left USNH. Despite these challenges, USNH EHS programs innovated and persevered, resulting in many notable achievements.

Activities are described by the disciplinary groups responsible for the respective EHS functions at each institution and reflect individual management system plans (goals and objectives) of the campuses. All EHS activities that monitor and otherwise influence operations that present potential environmental impacts are described together. Although described in more detail elsewhere in the report, certain accomplishments credited to this year are listed below in order to highlight the scope and long-term value of the environmental health and safety programs at each campus. Each of the accomplishments is the culmination of persistent efforts of professional USNH EHS staff and all involve extensive collaborations with other USNH departments and support programs.

#### **Granite State College**

Environmental Health and Safety (EHS) planning at Granite State College (GSC) in 2021 was focused on our continuing response to the COVID-19 pandemic. GSC Staff remained largely remote, with about a dozen essential staff working at GSC Concord in person. Weekly PCR testing was arranged for these on site staff through the lab at UNH Manchester. Bi-weekly COVID-19 status updates were presented to the College with important information on health and safety guidance from public health professionals. Routine safety work like ergonomic evaluations had to be adapted to remote/distance modalities. Given the merger with UNH, the status of future independent EHS reports by GSC is a subject of continuing discussion.

GSC has a very small EHS footprint: there are no laboratories, no storage tanks, no dangerous occupational duties, no residential programs, etc.

#### **Keene State College**

In 2021, Keene State, like higher education in general, faced VUCA conditions - that is, Volatility, Uncertainty, Complexity and Ambiguity in our sector. This is a result of new academic directions, changing market demographics, environmental disruptions to traditional business processes, and shifting operational technologies.

Within this context, the KSC EHS program was able to continue to support the pandemic measures taken by KSC in 2021 with significant emergency assistance from USNH and campus partners and vendors. However, it is increasingly clear that responding to the EHS concerns raised by the Covid pandemic will neither be quick nor conclusive in either the short (1 year) or medium term (3 years).

With this in mind, the KSC EHS program expects to continue to support KSC's pandemic response, both operationally by providing PPE and ventilation assessment services to address emerging issues from Covid impacts. We expect continued concern about ventilation in our buildings will require ongoing research and interactive communication with campus stakeholders.

Additionally, the Covid response has not only been outside of the traditional regulatory environment, but the pandemic has changed community expectations for environmental conditions. For example, KSC saw mold concerns arise in dorms this fall, partially caused by unusual weather in summer 2021, but also highlighted because of the increased awareness of the dorm population and their parents to environmental conditions in their living spaces.

The KSC EHS program has responded to this VUCA environment by balancing staff resources between regulatory compliance and support of the broader institutional mission of teaching, research, service and sustainability. We have also leveraged partnership with academic departments by increasing the number of student interns employed by the office to assist with both routine operations and research into emerging questions.

#### **Plymouth State University**

During 2021, Plymouth State University's Office of Environmental Health and Safety continued to play an instrumental role in the University's response to the pandemic and its ongoing planning, monitoring and adaptation of measures to ensure the safety of the campus. Faced with a variety of developing variants emerging with the virus, as a campus, we continued to adopt and develop mitigation strategies, public health policies and operational procedures in our efforts to further navigate the unprecedented health challenges presented to the campus and our community as a result of the pandemic.

As we emerge from the COVID19 crisis, we are asking, what will the post pandemic new normal look like? The global health crisis necessitated creative manners in which organizations had to operate and will undoubtedly continue to present challenges as we move forward in our efforts to recover. Plymouth has developed many tools over the past few years and have learned how to calculate the risks associated with Covid, but chances are we will be dealing with post covid conditions which reach far beyond the immediate health risks we had to address during the pandemic. The pandemic strained organizational resources on many levels. We find ourselves challenged by shortages in staffing, supplies, and finances. Employees have also had to adapt to changing workloads and have had troubles balancing work during the pandemic with their "at home" impacts from COVID19.

As we continue to move forward through 2022 and create the campus' post pandemic normal, Plymouth State University's Office of Environmental Health and Safety will focus efforts on transitioning from campus pandemic planning and mitigation, back to its core responsibilities as the department which provides guidance and develops and promulgates policies and practices which protect the campus and our faculty, staff and students from environmental and workplace hazards. The department will certainly continue to act as a resource and provide guidance for campus pandemic related questions, but it is with hope that department focus will return to pre pandemic goals.

Because of the campus's response to Covid-19 and our global pandemic was the priority for this office during calendar year 2021 and the continued unusual and unprecedented focus this office had in 2021, the use of industry consultants to assist with the identification of regulatory, compliance and programmatic gaps is necessary to clarify and focus on priority areas of concern. In conjunction with these industry consultants, a re-assessment of the goals and objectives, as well as program management, will be completed and areas of concern will be addressed as we continue operations and further safeguard the campus in 2022.

#### **University of New Hampshire**

UNH Office of Environmental Health and Safety (OEHS) has provided essential support and leadership during the pandemic response. Notable accomplishments during 2021 include:

#### Hazardous Waste Compliance Inspection

Hampshire Department of Environmental Services (NHDES) performed a comprehensive hazardous waste compliance inspection at UNH Durham in June, 2021. The final report of the inspection identified no pending action items and no penalties. Inspectors noted at the time of the inspection that UNH has the most complex hazardous waste management program in the state. Achieving this level of compliance is a clear indication of UNH's cultural commitment to safety and environmental stewardship.

Cayuse Hazard Safety Software Design and Roll-Out for Institutional Biosafety Committee

The Research Office purchased a software (Cayuse) for managing research grant awards and many regulatory aspects that go along with grant compliance. One of those aspects is compliance with the National Institutes of Health Guidelines for Research Involving Recombinant or Synthetic Nucleic Acid Molecules and oversight by the Institutional Biosafety Committee. EH&S participated in software design, development of supporting materials and implemented a "soft" roll out, with Principal Investigators adding new and renewal protocols into the system as they come up for expiration. Protocol transfer from the UNHCEMS® system to Cayuse IBC will be completed in 2021.

#### Stillings Hall MMIP Approval

During the fall of 2019, OEHS conducted its annual Monitoring Maintenance and Implementation Plan (MMIP) for Stillings Hall in accordance with the 2010 conditional approval granted by the United States Environmental Protection Agency (EPA) for the removal of windows and associated caulking that contained polychlorinated biphenyls (PCBs). An exceedance was detected during the 2019 surface wipe sampling that required notification to the USEPA and the development of a mitigation plan. The mitigation plan was reviewed by the EPA where they indicated that the current air monitoring action level, which was within the EPA Public Health Levels of PCBs in School Indoor Air, was not protective enough. In 2021 OEHS worked with an environmental engineering firm to request that the EPA revise the proposed action level; EPA approved the request and was granted final approval for the revised MMIP.

#### Research Environmental Growth Chamber Support

OEHS convened a group of technical experts to provide support designing a research environmental growth chamber for use with isotopically labeled carbon. Initial design draft design exhibited issues related to chemical safety and electrical safety. Through a collaborative evaluation process, issues were mitigated, greatly improving researcher safety. Chemical and electrical safety were main considerations in design discussions.

#### Broad Scope License Renewal

OEHS applied with the State of NH for full renewal of its broad scope license for radioactive material use. The broad scope license enables UNH to work with a diverse number of radioactive materials with a high degree of autonomy but requires a comprehensive radiation safety program and active radiation safety committee to receive approval. UNH fulfilled the rigorous state requirements to be granted the broad scope license.

#### Hazardous Waste Compliance Inspection

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#### Radioactive Material Source Reduction

OEHS worked with UNH researchers to schedule decommissioning of three liquid scintillation counters. Liquid scintillation counters are used to quantify radioactive materials in research samples and contain a radioactive source. The equipment had become unsupported by the manufacturer, so their value as a research tool was limited. By safely decommissioning the obsolete equipment, UNH reduced risks associated with managing the radioactive material in the equipment.

#### **University System of New Hampshire Central Offices**

The University System of New Hampshire's Central Office is committed to providing and maintaining a safe environment for its employees and visitors. USNH focuses on fire and life safety, hazardous material management, accident prevention, industrial hygiene, and safety and health training. The University System of New Hampshire Central Office complies with all required federal, state and local statutes and with USNH Policy.

#### **USNH Component Institution Collaboration Efforts**

Throughout the global pandemic of 2020 component institutions (KSC, PSU and UNH) collaborated as needed to assist institutions with continuity of operations and ensuring safe and healthful environments. In addition to collaborating on pandemic response and support component institutions strategized on projects such as underground and above ground storage tank management, regulated waste stream compliance initiatives, laboratory safety program management, institutional biological safety and security program management and integrated contingency and spill prevention control and countermeasure plans.

The Council provides system-wide review and comment at various stages of the rulemaking process for new or revised health and safety rules that might affect campus operations.

The Council reviews proposed bills being considered by the general court and provides input to each component institution's administration on the potential impact to campus operations.

#### **Emerging Issues**

Management of issues related to COVID-19 will continue to affect operations at USNH institutions in 2021. The extent to which operations can return to normal will influence long-term impact on EHS compliance and safety programs. As the need for COVID mitigation efforts diminishes, transition to normal staffing and program evaluation can proceed. Reassessment of the goals and objectives, as well as program management will be priorities for 2021.

#### **UNHCEMS 3.0**

OEHS staff will continue to be integral members of the UNHCEMS® development team as UNH Research Computing Center (RCC) continues the UNHCEMS 3.0 project. This multi-year project will continue project team meetings to design, build, and test the latest version of UNHCEMS®. This effort is a complete re-code and re-design of UNHCEMS®. UNH OEHS staff will continue working with members of the RCC and the UNH Innovations team. UNHCEMS provides critical safety and compliance information for UNH institutions; modernizing this system will ensure that the participating institutions can continue to rely on this critical EHS resource.

## USNH Council on Environmental Health and Safety Annual Report - December 2021

**Summary of System-wide Compliance Status** 

Summary of System-wide Co	UNH	PSU	KSU	GSC	USNH
	5.111		-1.00		
3.3.3.1.1 Injury and Illness Prevention					
3.3.3.1.2.1 Industrial Hygiene					
* Asbestos Abatement					
* Lead Abatement					
* Hearing Conservation					
* Indoor Air Quality					
* Personnel Exposure Monitoring for Toxic Materials					
* Respiratory Protection			_		
* Hazard Communication (GHS)			_		
* Heat Stress					
* Illumination					
3.3.3.1.2.2 General Safety					
* Confined Space					
* Fall Protection					
* Ergonomic Evaluation					
* Lock-Out/Tag -Out					
* Accident Investigation					
* Powered Industrial Trucks					
* Cranes & Hoists					
* Mobile Elevating Work Platforms			_		
* Dig Safe Program					
* Bloodborne Pathogens					
* Workplace Safety Inspections					
3.3.3.1.2.3 Radiation Safety & Laser Safety					
* Radioactive Material License					
* Radiation Safety Committee					
* Radioactive Material Inventory					
* Radiation Safety Manual					
* User/Awareness Training					
* Radiation Safety Laboratory Inspections					
* Dosimetry					
* Magnet Safety					
* X-Ray Safety					
* Radioactive Waste Management					
* Laser Safety					
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LEGEND Program in place					
Program undergoing review, improvement, or under development					
Program not in place					
Not Applicable					

# USNH Council on Environmental Health and Safety Annual Report - December 2021

**Summary of System-wide Compliance Status** 

Program Elements	UNH	PSU	KSU	GSC	USNH
3.3.3.1.2.4 Occupational Health and Medicine		_		_	_
* Respirator Medical Questionnaire					
* Hepatitis B Vaccination					
* Animal Handlers Occupational Health					
3.3.3.1.2.5 Integrated Contingency Planning			_		
* Aboveground Storage Tank Program			_		
* Underground Storage Tank Program			_		
* Integrated Contingency/Spill Prevention Control and Countermeasures Plan			-		
3.3.3.1.2.6 Biological Safety					
* Institutional Biosafety Committee					
* Biosafety Manual					
* Recombinant DNA Registration					
* Biosafety Laboratory Surveys					
* Inventory of Infectious Material					
* FDA Food Biosecurity Application					
3.3.3.1.2.7 Diving Safety					
* Diving Safety Control Board					
* Diving Safety Officer					
* Diving Safety Manual					
3.3.3.2 Hazardous Materials & Environmental Management					
3.3.3.2.2.1 Hazardous Waste Management					
* Hazardous Waste Management Program					
* EPA Identification Number					
* Faculty/Staff/Student Training					
* Contingency Plans for Central Accumulation Area					
* Satellite Accumulation Area Inspections					
* Universal Waste Management					
* Biohazardous Waste Management					
3.3.3.2.2.2 Hazardous Materials Inventory and Reporting					
* Chemical Environmental Mgmt System/Inventory System					
* DEA Controlled Substances Inventory					
* DHS Chemicals of Interest Inventory					
* Community Right To Know/SARA Title III					
* Safety Data Sheets					
* Chemical Safety/Hygiene Plan					
* Chemical Laboratory Inspections					
* Chemical Safety Committee					
* Title 5 Air Permit					
* Stormwater Management Plan					
* Refrigerant Management Plan					
* Water Quality Permits					
* Hazardous Materials Shipping					



#### USNH Environmental Health and Safety 2021 Annual Report Component Institution: Granite State College

Environmental Health and Safety (EHS) planning at Granite State College (GSC) in 2021 was focused on our continuing response to the COVID-19 pandemic. GSC Staff remained largely remote, with about a dozen essential staff working at GSC Concord in person. Weekly PCR testing was arranged for these on site staff through the lab at UNH Manchester. Bi-weekly COVID-19 status updates were presented to the College with important information on health and safety guidance from public health professionals. Routine safety work like ergonomic evaluations had to be adapted to remote/distance modalities. Given the merger with UNH, the status of future independent EHS reports by GSC is a subject of continuing discussion.

GSC has a very small EHS footprint: there are no laboratories, no storage tanks, no dangerous occupational duties, no residential programs, etc.

#### 1. Mission Statement

Granite State College (GSC) is committed to providing and maintaining a healthy and safe environment for students, employees, and visitors by ensuring compliance with legislative requirements as decreed by federal, state and local statutes, USY Policy VI.6 and GSC policy.

#### 2. Authority

The Board of Trustees Operation and Maintenance of Property Policy (BOT VI.F.3.3.3) calls on the Chancellor to establish procedures to ensure the prudent management of environmental health and safety in compliance with applicable state and federal laws. These procedures include formation of a Council on Environmental Health and Safety with representation from each component institution and further a delegation of authority

to the component institutions. In addition, the policy calls for preparation of an annual report describing the status of the University System's environmental health and safety efforts, as well as providing a mechanism for measuring compliance through periodic audits.

The USY Administrative Board Policy on Operation and Maintenance of Property/Policy on Environmental Health and Safety (USYVI.F.3), approved by the President of each component institution, delegates to the President of Granite State College the responsibility for implementing USNH Policy on Environmental Health and Safety for the college. In turn, the President of GSC has delegated this responsibility to the Director of Facilities, Safety, and Sustainability (hereafter GSC Safety Liaison) who will work towards the development and implementation of safety protocols around the College's six centers/locations:

- ➤ Conway Center 53 Technology Lane, Suite 150, Conway, NH (currently leased, not occupied by GSC)
- ➤ Concord Center 25 Hall Street, Concord, NH
- ➤ Manchester Center 1750 Elm Street, Manchester, NH
- ➤ **Dollof Center\*** 117 Pleasant Street, Concord, NH \*Child Welfare Education Partnership program with NH DCYF

#### 3. Campus Program Elements and Objectives

GSC has adopted a Health and Safety Mission Statement that works to assure safe and healthful environments for all segments of the GSC population through programs of information and education, review and monitoring, and technical consultation as needed. GSC has implemented programs to ensure compliance with applicable state and federal health, safety and environmental regulations, as well as GSC policies on environmental health and safety.

#### Injury and Illness Prevention

#### a. Industrial Hygiene

GSC has access to safety management specialists and outside consultants contracted by USNH to perform air quality monitoring and/or evaluation on an as needed basis. Other types of industrial hygiene are not generally applicable to GSC.

#### b. General Safety

The primary GSC safety issue is injury control. Ergonomic evaluations are performed as requested. Accident investigation is performed when an

illness/injury report is filed with human resources, and recommendations are made, if necessary, to prevent recurrence.

### c. Radiation Safety Not applicable

#### d. Fire Protection

The GSC Safety Liaison performs annual site safety inspections of all of the College's facilities. Part of this inspection addresses fire evacuation routes and planning. Fire safety systems and equipment are inspected annually by licensed external vendors.

#### d. Occupational Health and Medicine

Not applicable

#### e. Disaster Preparedness

Emergency evacuation procedures address evacuation in case of other disaster. The Emergency Operations Plan addresses in detail disaster preparedness.

### f. Biological Safety Not applicable

### g. Diving Safety Not applicable

#### Hazardous Material & Environmental Management

#### a. Hazardous Waste Management

GSC deals with very little hazardous waste. The only identifiable hazardous waste would be the disposal of fluorescent light bulbs, copier machine toner, and outdated computer monitors. GSC IT staff work with outside vendors to ensure the proper disposal of computer monitors. Each location has protocol in place for proper disposal of fluorescent light bulbs and copier toner.

#### b. Hazardous Materials Inventory and Reporting

The GSC locations that store janitorial cleaning supplies on site have GHS-SDS information on site, updated by the janitorial companies.

#### 4. Mechanisms to Measure Compliance

GSC measures compliance with safety policy by performing internal audits in the form of safety site evaluations of each center. These evaluations will be scheduled on an annual basis using a checklist of potential safety hazards that was

created by the GSC Safety Liaison and approved by the UNH Director of Environmental Health and Safety working on behalf of USNH Council of Environmental Health & Safety. This checklist will include the monitoring of facility safety issues, as well as verifying safety procedures are in place for emergency evacuation plans, hazardous materials disposal, and air quality.

The GSC Safety Liaison is the safety contact person responsible for safety oversight in all GSC locations. Responsibilities include maintaining and stocking first aid kits, posting emergency exit diagrams, and overseeing the inspection of fire safety systems and equipment.

#### USNH Council on Environmental Health and Safety Annual Report - December 2021

GSC Compliance Status December 2020 and December 2021

Program Elements	2020	2021
3.3.3.1.1 Injury and Illness Prevention		
_		
3.3.3.1.2.1 Industrial Hygiene  * Asbestos Abatement		
* Lead Abatement		
* Hearing Conservation		
* Indoor Air Quality		
* Personnel Exposure Monitoring for Toxic Materials		
* Respiratory Protection		
* Hazard Communication (GHS)		
* Heat Stress		
* Illumination		
3.3.3.1.2.2 General Safety		
* Confined Space		
* Fall Protection		
* Ergonomic Evaluation		
* Lock-Out/Tag -Out		
* Accident Investigation		
* Powered Industrial Trucks		
* Cranes & Hoists		
* Mobile Elevating Work Platform		
* Dig Safe Program		
* Bloodborne Pathogens		
* Workplace Safety Inspections		
3.3.3.1.2.3 Radiation Safety & Laser Safety		
* Radioactive Material License		
* Radiation Safety Committee		
* Radioactive Material Inventory		
* Radiation Safety Manual		
* User/Awareness Training		
* Radiation Safety Laboratory Inspections		
* Dosimetry		
* Magnet Safety		
* X-Ray Safety		
* Radioactive Waste Management		
* Laser Safety		
LEGEND		
Program in place		
Program undergoing review, improvement, or under development		
Program not in place		
Not Applicable		

#### USNH Council on Environmental Health and Safety Annual Report - December 2021

GSC Compliance Status December 2020 and December 2021

Program Elements	2020	2021
3.3.3.1.2.4 Occupational Health and Medicine		
* Respirator Medical Questionnaire		
* Hepatitis B Vaccination		
* Animal Handlers Occupational Health		
3.3.3.1.2.5 Integrated Contingency Planning		
* Aboveground Storage Tank Program		
* Underground Storage Tank Program		
* Integrated Contingency/Spill Prevention Control and Countermeasures Plan		
3.3.3.1.2.6 Biological Safety		
* Institutional Biosafety Committee		
* Biosafety Manual		
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* Biosafety Laboratory Surveys		
* Inventory of Infectious Material		
* FDA Food Biosecurity Application		
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* Refrigerant Management Plan		
* Water Quality Permits		
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# USNH Environmental Health and Safety Annual Report Keene State College Calendar Year 2021

#### **Covid Response**

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The KSC EHS program has responded to this VUCA environment by balancing staff resources between regulatory compliance and support of the broader institutional mission of teaching, research, service and sustainability. We have also leveraged partnership with academic departments by increasing the number of student interns employed by the office to assist with both routine operations and research into emerging questions.



#### **KSC EHS Program Aspects**

The KSC EHS annual report has been organized to reflect this reality by describing four aspects of the program with a brief rating in each of these aspects. The descriptive scale for describing the aspects of the program is:

Needs attention: The KSC EHS program can't keep up with stakeholder expectations

**Reactive:** The KSC EHS program can keep up with stakeholder expectations, but is unable to look forward to act on emerging challenges

Maintaining: EHS program is able to maintain previous progress in achieving program objectives. Proactive: in addition to meeting stakeholder expectations, EHS staff is able to identify new opportunities to support the academic mission.

The four aspects of the KSC EHS program are:

#### **Regulatory Compliance Status**

Current Goal: resolution of compliance concerns within deadline named by inspection agency

**KSC Status: reactive program** 

Aspects of this program

- Environmental health and safety regulatory compliance for:
  - o state air pollution requirements,
  - state underground storage tanks requirements,
  - state above ground storage tanks requirements,
  - state hazardous waste management requirements,
  - o federal and state hazmat emergency planning requirements,
  - state water supply reporting.
  - state and city fire code compliance
- Occupational safety expectations as identified by external stakeholders (state authorities, research funders and workers compensation carriers)
- Best practices established outside regulatory requirements (for example ANSI standards as applied to campus facilities such as fume hoods and biosafety cabinets)

#### **Emerging Campus Issues**

**Current Goal:** develop resilience plans for new concerns likely to arise

**KSC Status: proactive program** 

- Research and implement Covid risk management techniques in classrooms and public spaces by supplying a variety of types of masks to campus and deploying HEPA air cleaners into classrooms and other public spaces in poorly ventilated buildings.
- Identify potential mold and other Indoor Air Quality issues campus wide by working with Physical Plant and building managers to address occupant concerns
- Monitor emerging EHS concerns about Nanotech and 3D printers



• Respond to millennial cultural expectations for environmental health and safety

#### **Academic Support / Safety Culture Development**

**Goal:** demonstrate the direct value of the EHS program to the institutional mission of teaching, research and service

#### **KSC Status: maintaining program**

- Teaching support: provide specialized EHS lectures to classes upon faculty request; recruit SOAHS majors to participate in the work of the office; in 2021-2022 five safety majors participated in the office's work, providing both logistical and research support for compliance and Covid programs.
- Research support: provide training to research students and consult with faculty and staff about regulatory issues that arise in the research program
- Community Service: work with student groups to provide specialized safety training for activities outside of standard activities (for example, fire extinguisher training for theater and student activities requiring hot work oversight)

#### **Monitor National and Regional EHS trends**

#### **KSC Status:** proactive program

**Goal:** identify trends in higher education that are likely to impact KSC and establish KSC as a national leader for small college campuses on this topic

- Campus sustainability connections: work with KSC Sustainability office to understand the connection between their work and regulatory requirements to leverage synergies between the offices
- Development of a national academic safety culture: participate in efforts by national organizations, including the American Chemical Society and the Campus Safety Health and Environmental Management Association to understand and promote best practices integrating safety culture concepts into the academic environment.
- Identify job opportunities and scholarships pertinent to safety students at the regional and national level

# USNH Council on Environmental Health and Safety Annual Report - December 2021

KSC Compliance Status December 2020 and December 2021

Program Elements	2020	2021
3.3.3.1.1 Injury and Illness Prevention		
3.3.3.1.2.1 Industrial Hygiene		
* Asbestos Abatement		
* Lead Abatement		
* Hearing Conservation		
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* Radiation Safety Manual		
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* Radiation Safety Laboratory Inspections		
* Dosimetry		
* Magnet Safety		
* X-Ray Safety		
* Radioactive Waste Management		
* Laser Safety		
LEGEND		
Program in place		
Program undergoing review, improvement, or under development		
Program not in place		
Not Applicable		

### USNH Council on Environmental Health and Safety Annual Report - December 2020

KSC Compliance Status December 2020 and December 2021

Program Elements	2020	2021
<ul> <li>3.3.3.1.2.4 Occupational Health and Medicine</li> <li>* Respirator Medical Questionnaire</li> <li>* Hepatitis B Vaccination</li> <li>* Animal Handlers Occupational Health</li> </ul>	•	•
<ul> <li>3.3.3.1.2.5 Integrated Contingency Planning</li> <li>* Aboveground Storage Tank Program</li> <li>* Underground Storage Tank Program</li> <li>* Integrated Contingency/Spill Prevention Control and Countermeasures Plan</li> </ul>		•
<ul> <li>3.3.3.1.2.6 Biological Safety</li> <li>* Institutional Biosafety Committee</li> <li>* Biosafety Manual</li> <li>* Recombinant DNA Registration</li> <li>* Biosafety Laboratory Surveys</li> <li>* Inventory of Infectious Material</li> <li>* FDA Food Biosecurity Application</li> </ul>	•	
<ul> <li>3.3.3.1.2.7 Diving Safety</li> <li>* Diving Safety Control Board</li> <li>* Diving Safety Officer</li> <li>* Diving Safety Manual</li> </ul>	•	•
3.3.3.2 Hazardous Materials & Environmental Management 3.3.3.2.2.1 Hazardous Waste Management  * Hazardous Waste Management Program  * EPA Identification Number  * Faculty/Staff/Student Training  * Contingency Plans for Central Accumulation Area  * Satellite Accumulation Area Inspections  * Universal Waste Management  * Biohazardous Waste Management		
3.3.3.2.2.2 Hazardous Materials Inventory and Reporting  * Chemical Environmental Mgmt System/Inventory System  * DEA Controlled Substances Inventory  * DHS Chemicals of Interest Inventory  * Community Right To Know/SARA Title III  * Safety Data Sheets  * Chemical Safety/Hygiene Plan  * Chemical Laboratory Inspections  * Chemical Safety Committee  * Title 5 Air Permit  * Stormwater Management Plan  * Refrigerant Management Plan  * Water Quality Permits  * Hazardous Materials Shipping		



# 2021 USNH Environmental Health and Safety Annual Report For Plymouth State University

#### **EXECUTIVE SUMMARY**

During 2021, Plymouth State University's Office of Environmental Health and Safety continued to play an instrumental role in the University's response to the pandemic and its ongoing planning, monitoring and adaptation of measures to ensure the safety of the campus. Faced with a variety of developing variants emerging with the virus, as a campus, we continued to adopt and develop mitigation strategies, public health policies and operational procedures in our efforts to further navigate the unprecedented health challenges presented to the campus and our community as a result of the pandemic.

As we emerge from the COVID19 crisis, we are asking, what will the post pandemic new normal look like? The global health crisis necessitated creative manners in which organizations had to operate and will undoubtedly continue to present challenges as we move forward in our efforts to recover. Plymouth has developed many tools over the past few years and have learned how to calculate the risks associated with Covid, but chances are we will be dealing with post covid conditions which reach far beyond the immediate health risks we had to address during the pandemic. The pandemic strained organizational resources on many levels. We find ourselves challenged by shortages in staffing, supplies, and finances. Employees have also had to adapt to changing workloads and have had troubles balancing work during the pandemic with their "at home" impacts from COVID19.

As we continue to move forward through 2022 and create the campus' post pandemic normal, Plymouth State University's Office of Environmental Health and Safety will focus efforts on transitioning from campus pandemic planning and mitigation, back to its core responsibilities as the department which provides guidance and develops and promulgates policies and practices which protect the campus and our faculty, staff and students from environmental and workplace hazards. The department will certainly continue to act as a resource and provide guidance for campus pandemic related questions, but it is with hope that department focus will return to pre pandemic goals.

Because of the campus's response to Covid-19 and our global pandemic was the priority for this office during calendar year 2021 and the continued unusual and unprecedented focus this office had in 2021, the use of industry consultants to assist with the identification of regulatory, compliance and programmatic gaps is necessary to clarify and focus on priority areas of concern. In conjunction with these industry consultants, a re-assessment of the goals and objectives, as well as program management, will be completed and areas of concern will be addressed as we continue operations and further safeguard the campus in 2022.

The Office of Environmental Health and Safety remains committed to providing, and continually improving, a healthy and safe living, learning, and working environment for students, faculty, and staff. It is the responsibility of the Environmental Health and Safety team to help every individual on campus understand their role and responsibility for safety. The following report summarizes with detail the elements and activity of this office in 2021.

It is with sincere gratitude that I take this opportunity to thank those members of the Plymouth State University community for the dedication and continued collaboration as we navigated another challenging year. We have much work to do as a campus, a community and a nation as we forge forward but we will emerge successful. I look forward to our continued teamwork as a campus and a community.

Katie Caron, Director Office of Environmental Health & Safety Plymouth State University

#### **COVID-19 ACCOMPLISHMENTS by the PSU Rapid Response Team**

#### ■ Behavior Expectations, Enforcement, and Education

- As local public health and CDC guidance changed, behavior expectations, along with enforcement and education, were modified to meet the most recent public health guidelines and university requirements.
- Established enforcement protocols for noncompliance with COVID-19 safety policies.

#### • Testing and Screening

- Continued to determine testing methods and frequencies based on local and federal public health guidelines as well as community and state transmission levels. Both COVID-19 PCR and antigen test methods were utilized during calendar year 2021.
- Developed a campus-wide mandatory testing schedule for both the Fall of 2021 and Spring of 2022 semesters for students, faculty, and staff.
  - This testing scheduling involved a continuous evaluation based on number of COVID-19 cases within the community, county, and state.
  - Created and implemented a new rapid testing program for students, faculty and staff. This included creating a distribution system, tracking system for inventory and federal funding reimbursement, as well as identifying a proper storage location.
- Retesting intervals and needs. This included outreach and retesting for individuals that received an inconclusive test result, or test not processed.
- Documenting and tracking compliance status with mandatory testing requirements for students, faculty, and staff.
  - Worked with UNH to develop and implement the Panther Pass. The Panther pass is an app that can be viewed by select groups of PSU employees. This app allows PSU staff to see if a student is participating in the required COVID19 testing. This app does NOT communicate a test result, just participation in the campus's mandatory COVID19 testing program. For example, faculty who are instructing classes, the Dining Hall, Event Staff, as well as the on-campus gym could utilize this tool in an effort to ensure students participating in classes or activities were also participating in mandatory testing.
- Management of a safe, on campus testing environment.
- Continued working with a contracted with a vendor with expertise to perform observed COVID19 testing.
- Transitioned laboratory analysis of samples to the University System of New Hampshire (UNH) laboratory. This included updating and coordinating the appropriate technology for receiving and managing test results and well proactive communication to the campus.
- Partnered with the State of NH to coordinate multiple on campus vaccine clinics for faculty, staff, and students.

#### Contact Tracing & State of NH Public Health Functions

- PSU continued to implement contact tracing protocols and procedures developed during 2020.
  - Contact tracing functions were continually reviewed as state and federal public health guidelines were modified.

- Provided training to PSU employees who completed contact tracing functions as part of the Rapid Response Team. On-boarded new members to the contact tracing team.
- Continued to utilize the tracking and compliance tool to manage data for contact tracing efforts which included, but was not limited to, tracking all students, faculty and staff who were in isolation, quarantine, travel quarantine, as well as a watchlist for those with exposures. This also included additional items for data tracking needs. This tool was continuously updated, improved, and modified to provide data requested by campus leadership.
- Reported data regularly via a dashboard available to PSU as well as the surrounding community via website and town hall meetings.
- Continued direct communication with site contacts for the State of NH Public Health outreach and guidance, including the reporting of positive cases, close contacts, clusters, and general communication and guidance regarding COVID-19.
- Participated in USNH-specific meetings with the State of NH's top Public Health experts as scheduled.
- Trained and onboarded a new COVID-19 testing coordinator.
- Created and implemented a new process for faculty, staff, and students to end isolation early on day six (6) through day ten (10) with a negative antigen (rapid test).
  - Trained and onboarded a new employee to manage the new isolation exit process.

#### Isolation & Quarantine

In the fall of 2020 to the spring of 2021, PSU rented three hotels for offsite isolation and quarantine. An entire workflow was created and implemented to manage and operate these facilities. In preparation for the fall of 2021, PSU utilized an on-campus residence hall for isolation and quarantine purposes. A new workflow and process was created and implemented to manage and operate the on-campus isolation and quarantine process and facility. These workflows included items from 24/7 staffing, emergency and first aid management, health monitoring, cleaning, bedding/linen, meals, to facility (building) response.

#### • Classroom Spacing, Sanitization and Disinfection

- Continued to evaluate COVID-19 classroom occupancies and spacing to address social distancing recommendations by NH Public Health experts. Adjusted this as needed based on guidance from both the state and federal levels.
- Sanitization and disinfection materials were provided to every classroom space to allow access to COVID-19 disinfection materials.

#### Personal Protective Equipment (PPE)

- Continued to work with UNH personnel regarding PPE distribution to PSU's Campus.
- Continued to receive and track PPE requests via the PPE request form developed in 2021 managed by an onsite PSU team. This form tracks requests and distribution across campus. This tracking tool is used not only for requests and distribution but to also track for potential federal funding for reimbursement. This includes items such as face masks, gloves as well as hand sanitizer and sanitization wipes.

#### **CAMPUS PROGRAM ELEMENTS**

Plymouth State University's Office of Environmental Health and Safety is responsible for the development and management of the University's environmental health and safety programs. Areas of responsibility include

- Industrial Hygiene
- Workplace Safety & Training
- Radiation Safety
- Fire and Life Safety
- Occupational Health
- Risk Management
- Integrated Contingency Planning
- Biological and Chemical Safety
- Material Management/Hazardous
- Accident Prevention
- Environmental Compliance
- Emergency Response

PSU is committed in its compliance with all required Federal, State and Local statutes and ordinances, as well as with USNH Policy. Plymouth State University utilizes a "Traffic Light Summary" system to assist in identifying the compliance status of a number of Plymouth State University's key EHS program elements. The "Traffic Light Summary" may be found as an attachment at the end of this report.

#### **CAMPUS SAFETY COMMITTEE(s)**

The Campus Safety Committee serves as a central coordinating body for several areas of the University concerned with aspects of safety and security. The committee consists of representation from a variety of disciplines and departments across campus including Athletics, Art, Science, University Police, Facility Services, as well as representation from both Professional/Technical (PAT) and Operating (OS) staff. Previously, membership also included a representative from the Human Resource's Office was part of a system wide initiative which included the restructuring and re-allocation of duties across the USNH system as well as at PSU. Based on the new organizational structure, Human Resources departmental membership will be revisited during 2022 with a goal to determine availability and need. During calendar year 2021 the campus safety committee issued a winter safety newsletter. The committee published this winter safety newsletter which discusses a variety of topics, including the importance of following curtailment guidelines, subscribing to the University's text alert system and winter safety tips. The effort and emphasis on winter safety communication continues to serve as a proactive campaign to increase knowledge and awareness relative to winter hazards. The desired outcome of this campaign is to reduce the number of slip and fall cases reported during the winter months, all of which can directly affect workers compensation claims and cost.

The Boyd Safety Committee, created in 2015, takes its name from the Boyd Science Center. This Committee specifically focuses on safe practices in the science disciplines at PSU and seeks to meet semi-annually. Membership includes representatives from Atmospheric Science, Chemistry and Biology, as well as the Center for The Environment. Often, this committee meets on an "as needed" basis. This committee did not meet during calendar year 2021 due to ongoing COVID-

19 challenges and priorities. The EHS Office's goal is to begin to meet again in the fall of 2022 if the committee members agree.

#### INJURY AND ILLNESS PREVENTION

Plymouth State's Facilities Department has undergone a significant reduction in available labor over the past year due to staff turnover, retirements, and the overall impact of reduced resources surrounding the COVID19 pandemic. With this staffing reduction came the loss of several seasoned trades employees familiar with many of the EHS programs discussed below. Comprehensive training during 2022 will be prioritized to ensure that all new employees are trained appropriately and gaps due to employee changeover are managed while maximizing program education.

Specific comments for each EHS program are listed below.

#### INDUSTRIAL HYGIENE

During calendar year 2021, industrial hygiene needs at Plymouth State University were minimal. There was one industrial hygiene service completed related to indoor air quality/mold. Additionally, there were a minimal number of projects completed, largely due to the pandemic.

There were no asbestos abatements during calendar year 2021. This was also largely due to the ongoing COVID19 pandemic. All abatements follow industry specific safety and environmental regulations. All monitoring reports are on file and available for review in the EHS office.

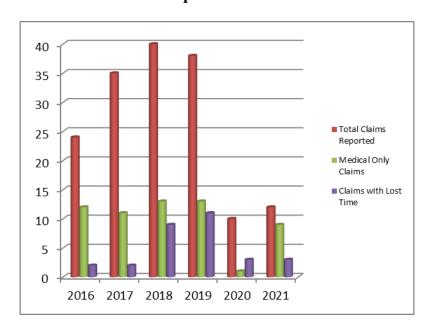
#### WORKPLACE SAFETY & TRAINING

In 2021, total workers' compensation claims reported for PSU totaled twelve (12) cases and yielded expenses totaling \$71,985 for the calendar year. Case totals increased slightly from 2020 to 2021 by two (2) cases. Both calendar years 2020 and 2021 saw a fairly significant decrease in the total number of cases (by about half). This is likely due to the impacts of Covid-19 and the transition to remote work plans as part of the University's pandemic response planning. During 2020 and through the summer of 2021, non-essential employees were encouraged, particularly during the peak of the pandemic, to work remotely while students were not living, learning, or working on campus. In calendar year 2020, strategically, PSU ended the fall semester at the end of November in anticipation of COVID-19 peak transmission (2020 peak) in the state of NH. As indicated above, during this time many non-essential employees were working remotely until mid to late January of 2021. This coincides with peak slip and fall season related to winter weather, which likely accounts for a portion of the decrease in workers compensation claims in calendar year 2020.

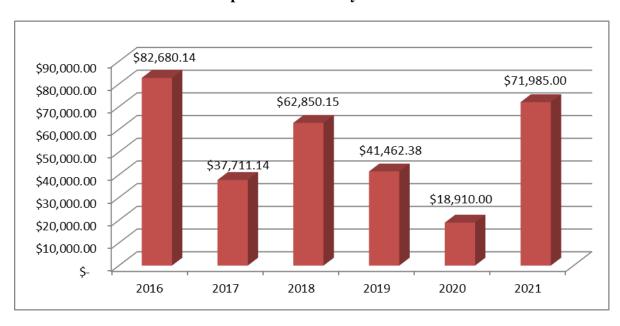
When reporting on case totals it is important to note the distinction between the types of claims included in this total. There are four criteria/distinctions considered when reporting total number of cases. The first distinction identifies "report only" claims and includes claims which are reported only and do not result in medical treatment or time away from work. The second distinction identifies "medical treatment only" which include claims resulting in medical treatment only but not lost time or days away from work. The third distinction identifies claims resulting in lost time away from work but did not receive medical treatment. The final distinction identifies claims resulting in both medical treatment and lost time or days away from work.

The total number of claims that resulted in lost time or days away from work stayed the same from 2020 to 2021 with a total of (3) cases. In 2019 (11) cases, and (9) cases in 2018. Cases resulting in medical treatment only but did not result in days away from work or lost time, increased in 2021 resulting in (9) cases. In 2020, total cases resulting in medical treatment was (1) case only. 2019 and 2018 were identical with a total of thirteen (13) cases. The charts shown on the following pages illustrate this information, and also provide a comparison of the total number of cases for the past five (5) calendar years as well as total costs incurred each year.

#### **Worker Compensation Claim Count**



**Worker Compensation Costs by Calendar Year** 



For calendar year 2021, the majority of PSU claims did not indicate a clear trend. Prior to 2021, the majority of workers compensation costs resided in the slips, trips and falls category.

The injury leading to the highest workers' compensation claim during calendar year 2021 resulted in a total cost of \$58,286. This case accounted for approximately 80% of the total expense associated with workers' compensation claims for the year. The injury was sustained while moving a couch (furniture) to vacuum underneath it. The employee's shoulder was injured during this task.

Reviewing the workers compensation costs from 2016 to 2021 illustrated in the above-noted chart, 2016, 2018, and 2021 stand out as higher than average years relative to trends with 2016 and 2021 being the highest. In both of these cases, shoulder injuries were the leading workers compensation claims. More specifically, in calendar year 2016, the substantial workers compensation cost increase was the direct result of a shoulder related injury that occurred from a fall. This injury was responsible for \$59,515.44 of the total \$82,680.14 in workers compensation costs for that year. In calendar year 2018, a slip and fall resulted in \$36,471.11 of the total \$62,850.15 in workers compensation costs. Lastly, in 2021 a shoulder related injury that occurred while moving furniture to clean, as stated above, accounted for \$58,286 out of the total \$71,985 in workers compensation costs.

The EHS Office and the Human Resources Office continue to work together with PSU's workers' compensation insurance carrier, to investigate employee accidents and manage claims. MEMIC continued as the workers compensation carrier for USNH during calendar year 2021. As noted above, during 2021, the Human Resource's Office has been a part of a system wide initiative which included a restructuring and re-allocation of duties across the USNH system as well as at PSU. Based on the new organizational structure it is a goal of the EHS Office to meet with the new team to discuss the continuation of this partnership, and to develop internal processes for notification and response. During calendar year 2021, as a result of reorganization efforts, a gap in communication occurred, therefore the EHS Office did not see all accident reports or workers compensation matters. Meeting and re-aligning duties will help to proactively ensure a continued partnership in workers compensation efforts.

The Office of Environmental Health and Safety along with the Safety committee continues to encourage all faculty and staff to report hazards so they can be quickly addressed. As always, the Facility Services Grounds Department and Building Service Workers respond quickly to any reports of hazards in an effort to address concerns and/or potentials for injury. Accidents involving visitors and students continue to be reviewed by the EHS Office, and investigated, as necessary. Parties to campus investigations include, as applicable, the Office of Environmental Health and Safety, Human Resources, the affected employee or student, and their respective managers and/or faculty as needed.

The EHS Office continues to conduct ergonomic evaluations as needed or requested throughout the year. These evaluations typically result in changes to improve workspaces and ultimately alleviate existing medical issues or to help mitigate the potential for future concerns for an individual. During calendar year 2021 no ergonomic evaluations were conducted. This was largely related to the COVID-19 pandemic. As noted above, throughout the pandemic there were times of the year where non-essential employees were given the option to work remotely, mainly during portions of the year when the risk was at the highest, or when students were not living and learning on campus. Many employees, including those in high-risk categories, were able to continue to work remotely or balance remote work with in-person schedules until PSU re-opened for the fall 2022 semester. Over the course of the next year it is likely the campus could see an increase in ergonomic requests, injuries, strains and/or repetitive use concerns if for no other reason than a return to normal for on-campus work. Remote work plans eliminate the opportunity

to manage and modify the workspace of an employee thus resulting in the inability to eliminate discomfort and potential risk of injury.

In addition, the EHS Office also serves as a liaison with the coordination of campus facility ADA needs.

During 2021 the were no specific ADA projects completed.

Facilities as well as EHS continued to maintain, install, or improve preventative measures regarding COVID-19 as needed. While preventive measures in indoor spaces may not be able to eliminate the risk of COVID-19 transmission entirely, they can help to reduce these risks. The major push of building changes and adjustments were made during the summer of 2020, to prepare for a return to on campus living and learning for the fall 2020 semester. Below is a list of the most notable projects that were implemented in 2020 and then maintained or improved during calendar year 2021. These projects were based on public health requirements and recommendations.

#### **COVID-19 Building Improvements and Projects – 2020 – Continuation into 2021**

- Installed (and maintained) plexi-glass barriers in various locations across campus.
   Prioritized point of service locations.
- Continued to purchase air purifiers for additional spaces based on request, prioritized areas with no mechanical ventilation.
- Maintained (and installed as needed) social distancing and COVID-19 signage across campus. These included floor marking (indicating 6ft or more distancing), doorway entrance and exit signage, as well as pedestrian traffic flow and directional management. This was a joint effort between Facilities and Marketing and Communications. In the second half of 2021 many of these distancing installations were removed as they were no longer needed or required based on public health guidelines.
- Established new occupancies (COVID-19 and social distancing) for all in person classroom spaces as well as spaces such as the Hartman Union Building and the Library.
   \*Beginning in the fall 2021 occupancies were returned to full capacity.
- Information Technology Services (ITS) spearheaded remote classroom technology upgrades across campus for increased remote learning capability during 2020 and maintained and serviced those installations throughout 2021.
- Continued to prioritize residential hall cleaning and disinfection with a campus wide emphasis on restrooms and high touch high surface areas. Re-directed as needed and requested based on campus infection rates.

Residential facilities reported, and the EHS Office responded to, occasional reports of bed bugs in residential facilities during 2021. The EHS Office, Facilities Services, and Residential Life continue to work closely in prevention and response efforts to these reports. During calendar year 2021 all reports of bed bug problems were acted upon immediately. There was a reduced number of cases reported during calendar year 2021. Investigations revealed no confirmation of bed bugs during 2021.

#### Fall Protection

Fall protection continues to be a priority for Plymouth State University's Office of Environmental Health and Safety. In 2018, a written fall protection and roof safety standard operating procedure

was completed. The full scope of this project was exceptionally complex, requiring a full survey of facility roofs and the identification of intended fall hazard mitigation strategies. Strategy considerations included the installation of anchor points, railings, as well as various other means to mitigate fall potential. The Office of Environmental Health and Safety will continue to partner with Facility Services to develop a strategic implementation plan identifying cost, need, risk and a proposed implementation schedule. Future campus projects will incorporate this fall protection strategy during the architectural phase of planning. Plymouth State University leadership approvals relative to project implementation and desired outcome for mitigation will be required/needed.

#### **Confined Space**

During calendar year 2020, the EHS Office continued to implement the existing confined space program, which had undergone an extensive review during 2017. This program includes proper issuance of the confined space permit and/or alternative entry certificate as needed. PSU's internal reporting procedures involve regular communication with the Plymouth Fire Department. Permits are reviewed and/or completed by the EHS Office.

#### **Lockout Tagout**

The Control of Hazardous Energy Lockout/Tagout (LOTO) standard, established by OSHA, outlines the proper shut down and isolation procedures required prior to conducting any servicing or maintenance activities. The goal of this program is to securely de-energize a piece of equipment prior to conducting work and to prevent the equipment from being re-started while the maintenance or service activity is in progress. PSU has a written LOTO program which underwent extensive review in 2017. PSU continues to operate via the written program. However, this program should be one of the programs reviewed by the third-party consultant.

#### **Powered Industrial Trucks**

Governance in the use of powered industrial trucks regulated by the OSHA Powered Industrial Truck Standard, 29 CFR 1910.178, outlines specific operating procedures, training requirements and inspections. PSU has one powered industrial truck, a forklift, in the Facility Services Department. PSU has a written procedure specific to industrial truck usage and the completion of authorized user training is required prior to operating the forklift.

#### **Cranes and Hoists**

PSU does not currently own or utilize any cranes or hoists on campus.

#### **RADIATION SAFETY**

Radiation Safety has limited applicability at PSU, due to a relative lack of radioactive material. PSU previously owned three transmission electron microscopes (TEM) that required registration with the State of NH, Department of Health and Human Services (DHHS), Radiological Health Section. One TEM, rendered inoperable, remains on site for strictly display purposes inside the Boyd Science Center. The two remaining TEMs, also rendered inoperable during the summer of 2017, have been removed from campus and properly disposed. All three TEMs have been removed from the NH DHHS registry.

The PSU Chemistry program acquired an Electron Capture Detector (ECD) during 2017. This device improves the chemical analytical capabilities of the program and is an important teaching

tool. This device contains a relatively low activity Nickel 63 (Ni<sup>63</sup>) source. The ECD requires an annual wipe test to confirm that no leakage from the device is taking place. Previously, PSU has utilized the wipe test procedure and conducted this test in place and has previously consulted with the full-time Radiation Safety Officer at UNH to ensure that proper procedures are being followed. This was not completed during 2021 and will be a priority to complete in 2022.

#### **FIRE PROTECTION**

The EHS office worked with Facilities Staff, as well as Residential Life Staff to ensure that fire and life safety equipment and programs were maintained during 2021. Efforts continue, in partnership with the State Fire Marshall's office, in continuing to conduct annual fire and life safety inspections of all campus buildings. Inspections are conducted in tandem with the State Fire Marshall's Office, the Facilities Department and the local Fire Department. The EHS office maintains copies of all inspection reports, assembly permits, and certificates of occupancy.

Fire drills are typically conducted each fall in all Residence Halls and Student Apartments. During calendar year 2021, due to the COVID-19 pandemic, fire drills were not conducted. Absent unforeseen circumstances, we will resume conducting these drills in the fall of 2023.

The EHS Office has traditionally participated in monthly meetings with the Plymouth Fire Chief and the State Fire Marshal's Office. Because a portion of the Plymouth State University campus is situated in the town of Holderness, the Holderness Fire Chief participates at these meetings as well when applicable. The purpose of the regularly scheduled meetings is to review campus fire protection and life safety issues pertaining to projects and campus activities. These meetings were also affected by the COVID-19 pandemic and were not conducted in person during 2021. Facilities staff, on behalf of the EHS Office, and in relation to campus specific projects, continued to work with the local fire departments and the State Fire Marshall's Office as needed on various projects, as well as to conduct life safety inspections. During 2022, the EHS Office will work with the state and local fire agencies to determine if they would like to re-institute these meetings. During 2021, the longtime Holderness Fire Chief, Eleanor Mardin retired. Chief Mardin had a longstanding partnership with the University and will be missed. This position was filled by Deputy Chief Jeremy Bonan, who served on both the Plymouth and Holderness Fire Departments before entering into the Chief's position in the town of Holderness.

#### Fire Marshal Approval-Projects

The EHS Office continues to work alongside management teams within the Facility Services Department during campus project planning and execution. This allows for input in areas such as fire, life safety, as well as compliance with the Americans with Disabilities Act (ADA). There were less projects than previous years due to COVID-19 impacts. Notable projects in 2021, included but were not limited to:

<b>Building Name</b>	Project Completed
Draper & Maynard	Repaired a timber post on the first floor of D&M that had been rotting below grade causing portions of the building to settle.
Draper & Maynard	Renovated a portion of the 4th floor in support of the Electromechanical Technology and Robotics (EMTR) program.

Eco House (Diversity House)	Miscellaneous renovations including new roof, porch, and flooring.
Kelly House	Permitting began in CY 2021 to renovate the space from administrative to residential. The renovation itself began in CY 2022.
Boyd Roof	Renovation to a portion of the 4th floor in support of the Electromechanical Technology and Robotics (EMTR) program.

#### **Fire/Life Safety Communication**

Plymouth State University (PSU) continues fire alarm communication with the use of radio boxes. In the event of any fire alarm activation, these radio boxes will notify Lakes Region Mutual Aid and the Plymouth Fire Department will be dispatched. The system completes a self-test daily.

During January of 2015 Plymouth State University received notification from the Plymouth Fire Department that the antenna tower located on Belknap Mountain collapsed and sustained significant storm damage. This antenna's job included sending a radio signal to Lakes Region Mutual Aid, who then notified the fire department with each fire alarm activation. The antenna was temporarily relocated in an effort to ensure continued service, not only for PSU, but for other Lakes Region Mutual Aid customers.

All Plymouth State University radio boxes now transmit their signals to a piece of equipment located at the Plymouth Fire Department. This unit calls Property Protection Management via cell phone who then dispatches Plymouth Fire Department for emergency response.

Plymouth State University continues to monitor and maintain the carbon monoxide detection devices required in some residential areas. At Plymouth State University (PSU), these residential areas are those having propane fired clothes dryers. These devices were installed in 2012 and continue to be connected to each building's fire alarm system. In the event of any carbon monoxide detection, the alarm will sound within the building and the Plymouth Fire Department will be dispatched.

#### OCCUPATIONAL HEALTH AND MEDICINE

During 2021, Plymouth State University continued to offer the Hepatitis B vaccination program to applicable employees. Plymouth State University continues to utilize the declination form as a way to document employees who decide to opt out of the vaccination program. During 2021 annual Blood Borne Pathogens training did not occur. This will be a priority to complete during summer of 2022.

The Health and Human Performance Department, the Physical Education Center, Physical Plant, Health Services Center, and applicable departments within the Hartman Union Building (HUB) and student life operations, participate in this program.

#### INTEGRATED CONTINGENCY PLANNING

#### Above Ground Storage Tanks & Spill Control & Countermeasure Plan

The PSU main campus has 30 petroleum containers, including: (1) 2,500 gallon oil tank, six (6) diesel generators, a diesel generator day tank and fire pump, two (2) drum storage areas as well as nineteen small ASTs used for on-premises heating. All of these above ground storage tanks or oil storage areas are regulated and registered with NHDES. Additionally, PSU has a co-generation facility with three larger tanks that currently hold #2 fuel oil. The campus currently maintains two spill control and countermeasure (SPCC) plans. One for the main campus and one for the co-generation plant. All written SPCC plans require re-certification, typically by an engineer, once every five years. Because there were no changes to the Co-Generation Plant's SPCC plan the EHS Director was able to self-certify the plan during calendar year 2021 as it was up for re-certification.

Additionally, during 2021 PSU's main campus continued to operate via the campus Spill Prevention, Control and Countermeasure (SPCC) Plan. Due to staff turnover, retirements, and the overall impact of reduced resources surrounding the COVID19 pandemic, not all required above ground storage tank inspections were completed as required by the plan. A priority of the EHS Office in 2022 will be to identify and train new staff to complete this requirement.

#### 8.2 Underground Storage Tank Program

PSU has two underground storage tanks located at the PE Center on the Holderness side of campus. Due to the COVID-19 pandemic underground storage tank (UST) training for tank operators was put on hold by the NH Department of Environmental Services during 2020 and part of 2021. This training is required for class A, & B Operators. Training for this program has resumed in an online format. Training needs to be completed in early 2022 for class A and B operators. Additionally, new Class B & C operators will need to be identified and trained in early 2022 as well. As with the AST inspections noted above, due to staff turnover, retirements, and the overall impact of reduced resources surrounding the COVID19 pandemic, not all required underground storage tank inspections were completed as required. The goal of the EHS Office in 2022 is to identify and train new staff to complete this requirement.

#### 9.0 BIOLOGICAL SAFETY

PSU has one Biosafety Level 2 (BSL2) facility in Boyd Science Center, which actively conducts research using bacteria falling under the BSL2 federal classification category.

During 2019, a formal Institutional Biosafety Committee (IBC) was created by PSU's Biological Safety Officer as well as the EHS Office. Creating a formal IBC was a priority for both the EHS Office and the Biological Safety Officer, Dr. Mike Son. Previously, there had been an informal committee in place to manage compliance requirements while a formal committee was being assembled. To become a formal IBC, there is specific committee membership required to meet the National Institutes of Health (NIH) guidelines. Part of this membership includes two members of the local community. These individuals are to represent the interests of the community and surrounding areas with respect to the environmental and public health. Due to the global pandemic and the restrictions placed on the PSU community, including those surrounding campus access, the IBC is undergoing a re-establishment of its members, particularly the community members. At this time, we only have an informal committee until these roles can be filled, which will attempted to be filled during 2022.

In addition to the community membership component, the purpose of an IBC, as a whole, is to ensure that any lab conducting research with, or planning to conduct research with, biological organisms (i.e. animals, plants, bacteria, fungi, and viruses) or parts thereof (i.e. genetic materials (DNA/RNA) or proteins) is conducting such research in accordance with guidelines set forth by both State and Federal legislation. The PSU IBC is currently overseen by PSU's Biological Safety Officer, as well as the EHS Office. The formal IBC will begin having meeting(s) as needed and required. It is anticipated this committee will meet on an annual to semiannual basis. This requirement will be re-accessed during 2022 so a plan is put in place for calendar year 2023. The IBC meeting goals were put on hold in 2021 as resources were shifted to meet the needs of the COVID19 response.

Additionally, since completion of the BSL2 facility, the lab space has been used to conduct both research activities and course related lab work across two different disciplines — Biological Sciences (also serving other departments to satisfy student interests) and Nursing. All research activities have been conducted in accordance with federally funded grants and have led to several milestones. These milestones include federally funded research activities from July 1, 2013 to present. Research by the graduate and undergraduate students has led to three peer-reviewed publications (most recently in 2021) and two book chapters (primarily contributed by the graduate students), in addition to numerous public presentations, both in poster and oral form, by the primary faculty member, and his students.

Initial safety, both personal and environmental, has been considered and is strictly enforced through Plymouth's current working procedures. These procedures are typically annually reviewed and modified, if necessary, by the IBC to remain compliant with State and Federal regulations. With the reprioritization of staff, resources, and responsibilities of COVID-19 response this review did not happen during 2021. This will be reassessed with a target date assigned during 2022.

Training for all authorized personnel is conducted on a yearly basis, through the CITI training program for which PSU has registered and is in compliance. This CITI training is currently monitored/overseen by the Office of Sponsored Programs. In addition, faculty are asked to continue to practice annual training within each lab, as well as ensuring students and personnel are also trained through the safety program established by the Geisel School of Medicine at Dartmouth College, via the NH-INBRE (New Hampshire IDeA (Institutional Development Award) Network for Biomedical Research Excellence).

In addition to the ongoing research activities, approximately 50 students per academic year, are trained in the basics of microbiology and research (up to 20 students in fall under the Biology major, and up to 40 students in spring under the Nursing program). At the start of each semester, students are introduced to the safety regulations and restrictions of working in a BSL2 facility, raising public awareness of both State and Federal regulations, but also of the importance of basic research ongoing at PSU.

#### **DIVING SAFETY**

Diving safety was listed as "not applicable" in the Compliance Status "Traffic Light" summary in the 2017 EHS Report as PSU no longer offers archeology classes involving diving. This continues to apply for 2020. The only diving activities associated with PSU are four SCUBA classes that are offered annually as part of Physical Education offerings, two classes in the spring semester, two classes in the fall semester. These are taught by an adjunct instructor who owns a local dive

shop. Classes follow protocol set by the SSI (SCUBA Schools International) a worldwide diver certification agency.

#### HAZARDOUS MATERIALS/ENVIRONMENTAL MANAGEMENT

#### **Hazardous Waste Management**

The EHS Office oversees all hazardous waste activity on campus, including removal, and ensures the timely inspection of all waste accumulation and storage areas.

The micro scale techniques used in the Boyd Science building continue, resulting in very small waste streams for most programs. However, as research grants increase and cluster initiatives develop, it is possible that hazardous waste streams will increase commensurately. During 2021, the EHS office continued to work with the Science and Art disciplines to ensure all waste streams are handled properly. Currently both the Plymouth and Holderness campuses are small quantity-extended generators (SQG) of hazardous waste. Each site has its own separate EPA site number.

While PSU is considered a SQG by the State of NH, a one-time laboratory cleanout in June 2021 resulted in acutely hazardous waste generated at a level that exceeded the Federal Large Quantity Generator (LQG) threshold. In this instance, PSU was required to submit a biennial hazardous waste report identifying the waste streams, how they were generated, where they were transported to, and how they were disposed of.

Although not required for an SQG, PSU historically conducted weekly inspections of accumulation areas. These inspections were conducted by faculty and staff. Due to the COVID-19 pandemic and staff turnover, these did not occur in 2020 and 2021. The EHS Office would like to return to completing these inspections in the fall semester (September 2022). Although not required, they are proactive and aid in compliance.

In 2021, due to the COVID-19 pandemic, the Director of EHS did not maintain her certification as a New Hampshire Hazardous Waste Coordinator. This training is not a requirement for small quantity generators. The purpose of this training is to ensure those who generate hazardous waste are knowledgeable about the rules and regulations regarding hazardous waste management, including NH specific hazardous waste rules. This training also meets a Resource Conservation and Recovery Act (RCRA) annual training. This training is required for those who generate more than 220 pounds per month of hazardous waste. PSU is currently considered a small quantity generator (SQG) by the State of NH, generating less than 220 pounds per month of hazardous waste. This training is a priority during calendar year. Attending this training, although not required, is a proactive opportunity to maintain knowledge specific to hazardous waste regulations as well as learning about any potential upcoming regulatory changes.

The University continues to utilize Clean Harbors for hazardous materials and waste disposal. Clean Harbors provided guidance in assessing potential hazards and aided in regulatory compliance regarding hazardous waste on campus.

The hazardous waste program will be one that will require review from a EHS consultant during 2022.

#### HAZARDOUS MATERIALS INVENTORY AND REPORTING

#### **Chemical Environmental Management System (CEMS)**

UNH (developer of the CEMS system) continues to host and maintain the software and data for Plymouth State University. A continued partnership and extended service agreement for the CEMS system in place between institutions allows PSU to access safety data sheet information and gain improved compliance reporting capabilities. Automatic updates managed by UNH via the service agreement insures up-to-date software tools. Plymouth State's Office of Environmental Health and Safety department relies heavily on specific campus liaisons (Art and Science disciplines) to continue to maintain their portion of the inventory.

The EHS Office continues to monitor the volume and use of numerous chemicals on the US. Department of Homeland Security's (US DHS) "Chemicals of Interest" list. If on-hand amounts exceed pre-set limits, PSU is required to notify US DHS within a specific timeframe.

Given the complexity in nature of the CEMS system and the associated compliance requirements involved with storing chemicals, inventory verification is a priority initiative for the Office of Environmental Health and Safety. Phase I of a multi-phase strategic plan involving PSU's CEMS system includes the verification and the development of a detailed inventory of all campus buildings which store and use regulated chemicals. Phase I had been identified as a priority goal for the department in calendar years 2020 and 2021. However, due to competing priorities during the COVID-19 pandemic, as well as needing external consultants on site to complete this goal, put this on hold during the duration of the pandemic. Originally it was the hope of the department to review this during 2021. However, as the pandemic continued, including the need to plan for subsequent variants of concern, as referenced in the executive summary, this goal will be reassessed during calendar year 2022 with a timeline communicated in 2022's annal report. Efforts will focus on identifying those clusters which use and store the largest quantities of chemicals. Equal attention will focus on clusters storing regulated chemicals despite quantity. Primary buildings include the Boyd Science Center and its related laboratories, the Draper and Maynard art building, as well as the Silver Center for the Arts theatre building. Although not an exhaustive list of buildings needing review, the priority will be to inventory the buildings with the heaviest usage and storage of regulated chemicals. Future phases of the plan include compliance and governance relative to all campus material safety data sheets (SDS). Oversight and management of the CEMS system requires significant resources both physical and financial in nature. The implementation of Phase I as well as future phases of this initiative will require additional leadership discussions and possible approvals to ensure the appropriate resources are in place to complete the goals as outlined.

#### Air Quality, State Permit to Operate

PSU currently operates air pollutant-emitting equipment under a State Permit to Operate, which covers our three Co-Generation Plant boilers and nine emergency generators located throughout campus. The Permit to Operate was renewed with the NH Department of Environmental Service (NHDES) and was formally issued in March 2019. The renewed permit will be valid for a period of ten years after the date of issue. As part of the permit renewal process, the University hired an environmental consulting firm to conduct a third-party audit. This was undertaken to confirm the University's compliance with conditions identified in the State Permit to Operate. Additionally, as part of the air permit requirements, PSU annually quantifies the emissions from each device, and pays a fee to the New Hampshire Department of Environmental Services based on the total amount of emissions from campus.

There was no change to this during 2021.

#### **Emergency Planning & Community Right-to-Know**

The Emergency Planning and Community Right to Know Act (EPCRA), is a statute designed to improve community access to information about chemical hazards, and to facilitate the development of chemical emergency response plans by the State of NH and local government. As part of this statue, Plymouth State University is required to complete an annual TIER II Report by March 1<sup>st</sup> of each calendar year. This report requires a submittal to the State of NH, as well as to state and local emergency planning committees (SERCs & LEPCs) including the town of Plymouth and Holderness fire departments. This report has been completed for 2021 as required. For reporting year 2020 (submitted in 2021), the table below summaries the TIER II reporting for the campus over threshold quantities:

Substance	Threshold (pounds)	RY2021 Max Storage (pounds)
Batteries	10,000	12,979
Sulfuric Acid	500	2,596
Salt	10,000	198,200
Sand	10,000	302,400
#2 Fuel Oil	10,000	513,074
Biofuel (3)	10,000	0
#6 Fuel Oil (1)	10,000	0
Diesel	10,000	13,826
Propane	10,000	68,825
(hydraulic Oil) Elevators	10,000	25,046
Transformer Oil	10,000	50,252
Compressed Nat. Gas	10,000	48,000
Glycol	10,000	69,709
Waste Ammonia (2)	500	25,147
Wood Pellets	10,000	88,000
CEMS Inventory	Varies	All Below Reporting Thresholds
Sulfuric Acid	500	95

#### MECHANISMS FOR COMPLIANCE

PSU utilizes several mechanisms to ensure it meets all state and federal requirements, including the requirements mentioned in this report. Methods include, but are not limited to, publications and membership in professional organizations such as the American Society of Safety Engineers (ASSE), Campus Safety, Health, and Environmental Management Association (CSHEMA), and the Association of Physical Plant Administrators (A.P.P.A.). Formal training and internal procedures are also utilized to ensure compliance. Regular inspections conducted by local fire departments and the State Fire Marshal's Office, combined with regular communication with state and federal agencies over various matters, also keeps the EHS Office up to date on any new or upcoming requirements.

The Office of Environmental, Health and Safety was left with a staffing vacancy in May of 2020. The original goal as to review the EHS Coordinator position for rehire during calendar year 2021. Due to the ongoing nature of the COVID19 pandemic this was delayed. However, this will be reviewed during calendar year 2022 with a proposal for PSU cabinet review. If approved, this position will help to provide additional operational support within the EHS Office.

# USNH Council on Environmental Health and Safety Annual Report - December 2020

PSU Compliance Status December 2020 and December 2021

PSU Compliance Status December 2020 and Decem Program Elements	2020	2021
3.3.3.1.1 Injury and Illness Prevention  3.3.3.1.2.1 Industrial Hygiene  * Asbestos Abatement  * Lead Abatement  * Hearing Conservation  * Indoor Air Quality  * Personnel Exposure Monitoring for Toxic Materials  * Respiratory Protection  * Hazard Communication (GHS)  * Heat Stress  * Illumination		
* Confined Space  * Fall Protection  * Ergonomic Evaluation  * Lock-Out/Tag -Out  * Accident Investigation  * Powered Industrial Trucks  * Cranes & Hoists  * Mobile Elevating Work Platform  * Dig Safe Program  * Bloodborne Pathogens  * Workplace Safety Inspections		
* Radioactive Material License  * Radioactive Material License  * Radioactive Material Inventory  * Radiation Safety Manual  * User/Awareness Training  * Radiation Safety Laboratory Inspections  * Dosimetry  * Magnet Safety  * X-Ray Safety  * Radioactive Waste Management  * Laser Safety		
<b>LEGEND</b> Program in place Program undergoing review, improvement, or under development Program not in place Not Applicable		•

### USNH Council on Environmental Health and Safety Annual Report - December 2020

PSU Compliance Status December 2020 and December 2021

Program Elements	2020	2021
3.3.3.1.2.4 Occupational Health and Medicine		
* Respirator Medical Questionnaire		
* Hepatitis B Vaccination		
* Animal Handlers Occupational Health		
3.3.3.1.2.5 Integrated Contingency Planning		
* Aboveground Storage Tank Program		
* Underground Storage Tank Program		
* Integrated Contingency/Spill Prevention Control and Countermeasures Plan		
3.3.3.1.2.6 Biological Safety		
* Institutional Biosafety Committee		
* Biosafety Manual		
* Recombinant DNA Registration		
* Biosafety Laboratory Surveys		
* Inventory of Infectious Material		
* FDA Food Biosecurity Application		
3.3.3.1.2.7 Diving Safety		
* Diving Safety Control Board		
* Diving Safety Officer		
* Diving Safety Manual		
3.3.3.2 Hazardous Materials & Environmental Management		
3.3.3.2.2.1 Hazardous Waste Management		
* Hazardous Waste Management Program		
* EPA Identification Number		
* Faculty/Staff/Student Training		
* Contingency Plans for Central Accumulation Area		
* Satellite Accumulation Area Inspections		
* Universal Waste Management		
* Biohazardous Waste Management		
3.3.3.2.2.2 Hazardous Materials Inventory and Reporting		
* Chemical Environmental Mgmt System/Inventory System		
* DEA Controlled Substances Inventory		
* DHS Chemicals of Interest Inventory		
* Community Right To Know/SARA Title III		
* Safety Data Sheets		0
* Chemical Safety/Hygiene Plan		
* Chemical Laboratory Inspections		
* Chemical Safety Committee		•
* Title 5 Air Permit		
* Stormwater Management Plan		
* Refrigerant Management Plan		0
* Water Quality Permits		
* Hazardous Materials Shipping		



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#### **Acronvms**

AAL Ambient Air Limits

ABSL-1 Animal Biosafety Level 1

ACGIH American Conference of Governmental Industrial Hygienists

ACM Asbestos Containing Material

ALARA As Low As Reasonably Achievable

ANSI American National Standards Institute

AST Aboveground Storage Tank

BIC Biotechnology Innovation Center

BSL-1 Biosafety Level 1

BSL-2 Biosafety Level 2

CAAA Clean Air Act Amendments

CEPS College of Engineering and Physical Sciences

CFATS Chemical Facility Anti-Terrorism Standards

CFR Code of Federal Regulations

CHWAA Central Hazardous Waste Accumulation Area

CLIA Clinical Laboratory Improvement Amendments of 1988

COLSA College of Life Sciences and Agriculture

CSC Chemical Safety Committee

CTS Chemical Transfer Station

DAW Dry Active Waste

DFD Durham Fire Department

DHS Department of Homeland Security

DIS Decay-in-Store

DNA Deoxy Ribonucleic Acid

DOT Department of Transportation

EHSC Emergency Health and Safety Committee

EH&S Environmental Health & Safety

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#### **Acronyms (Continued)**

EPCRA Emergency Planning and Community Right to Know Act

EPP Emergency Procedures Program

GC Gas Chromatograph

HR Human Resources

HVAC Heating Ventilation and Air Conditioning

IACUC Institutional Animal Care and Use Committee

IAQ Indoor Air Quality

IBC Institutional Biosafety Committee

ICP Integrated Contingency Plan

IEQ Indoor Environmental Quality

LED Light Emitting Diode

LEPC Local Emergency Planning Committee/Coordinator

LPG Liquefied Propane Gas

LSC Liquid Scintillation Counter

LSII Laboratory Safety Inspection Initiative

LSP Laser Safety Program

MCBS Molecular, Cellular, and Biological Science

MOD-rate Experience Modification Rate

MSP Magnet Safety Program

NHDES New Hampshire Department of Environmental Services

NHVDL New Hampshire Veterinary Diagnostic Laboratory

NMR Nuclear Magnetic Resonance

ODS Ozone Depleting Substances

OEHS Office of Environmental Health and Safety

OSHA Occupational Safety and Health Administration

PCBs Polychlorinated Biphenyls

#### **Acronyms (Continued)**

PE Professional Engineer

PEL Permissible Exposure Limit

Pls Principal Investigators

PIT Powered Industrial Truck

PPE Personal Protective Equipment

PSA Public Service Announcement

RMP Refrigerant Management Program

RNA Ribonucleic Acid

RPP Radiation Protection Program

RSO Radiation Safety Officer

RSC Radiation Safety Committee

RSUG Radiation Safety Users Guide

RTAP Regulated Toxic Air Pollutants

SARA Superfund Amendments and Reauthorization Act

SCUBA Self-contained Underwater Breathing Apparatus

SDS Safety Data Sheets

SERC State Emergency Planning Coordinator/Committee

SM Superconducting Magnet

SOP Standard Operating Procedure

SPCC Spill Prevention Control and Countermeasure Plan

UIC University Instrumentation Center

UNH University of New Hampshire

UNHCEMS® University of New Hampshire Chemical Environmental Management System

UNH-M University of New Hampshire at Manchester

UNH PD University of New Hampshire Police Department

US EPA United States Environmental Protection Agency

USNH University System of New Hampshire

XPP X-ray Protection Program

#### 1.0 Major Accomplishments

#### Hazardous Waste Compliance Inspection

Hampshire Department of Environmental Services (NHDES) performed a comprehensive hazardous waste compliance inspection at UNH Durham in June, 2021. The final report of the inspection identified no pending action items and no penalties. Inspectors noted at the time of the inspection that UNH has the most complex hazardous waste management program in the state. Achieving this level of compliance is a clear indication of UNH's cultural commitment to safety and environmental stewardship.

# > Cayuse Hazard Safety Software Design and Roll-Out for Institutional Biosafety Committee

The Research Office purchased a software (Cayuse) for managing research grant awards and many regulatory aspects that go along with grant compliance. One of those aspects is compliance with the *National Institutes of Health Guidelines for Research Involving Recombinant or Synthetic Nucleic Acid Molecules* and oversight by the Institutional Biosafety Committee. EH&S participated in software design, development of supporting materials and implemented a "soft" roll out, with Principal Investigators adding new and renewal protocols into the system as they come up for expiration. Protocol transfer from the UNHCEMS® system to Cayuse IBC will be completed in 2021.

#### > Stillings Hall MMIP Approval

During the fall of 2019, OEHS conducted its annual Monitoring Maintenance and Implementation Plan (MMIP) for Stillings Hall in accordance with the 2010 conditional approval granted by the United States Environmental Protection Agency (EPA) for the removal of windows and associated caulking that contained polychlorinated biphenyls (PCBs). An exceedance was detected during the 2019 surface wipe sampling that required notification to the USEPA and the development of a mitigation plan. The mitigation plan was reviewed by the EPA where they indicated that the current air monitoring action level, which was within the EPA Public Health Levels of PCBs in School Indoor Air, was not protective enough. In 2021 OEHS worked with an environmental engineering firm to request that the EPA revise the proposed action level; EPA approved the request and was granted final approval for the revised MMIP.

#### Research Environmental Growth Chamber Support

OEHS convened a group of technical experts to provide support designing a research environmental growth chamber for use with isotopically labeled carbon. Initial design draft design exhibited issues related to chemical safety and electrical safety. Through a collaborative evaluation process, issues were mitigated, greatly improving researcher safety. Chemical and electrical safety were main considerations in design discussions.

#### Broad Scope License Renewal

OEHS applied with the State of NH for full renewal of its broad scope license for radioactive material use. The broad scope license enables UNH to work with a diverse number of radioactive materials with a high degree of autonomy but requires a comprehensive radiation safety program and active radiation safety committee to receive approval. UNH fulfilled the rigorous state requirements to be granted the broad scope license.

#### Hazardous Waste Compliance Inspection

New Hampshire Department of Environmental Services (NHDES) performed a comprehensive hazardous waste compliance inspection at UNH Durham in June, 2021. The final report of the inspection identified no pending action items and no penalties. Inspectors noted at the time of the inspection that UNH has the most complex hazardous waste management program in the state. Achieving this level of compliance is a clear indication of UNH's cultural commitment to safety and environmental stewardship.

#### Radioactive Material Source Reduction

OEHS worked with UNH researchers to schedule decommissioning of three liquid scintillation counters. Liquid scintillation counters are used to quantify radioactive materials in research samples and contain a radioactive source. The equipment had become unsupported by the manufacturer, so their value as a research tool was limited. By safely decommissioning the obsolete equipment, UNH reduced risks associated with managing the radioactive material in the equipment.







#### 2.0 Mission Statement

The UNH OEHS works to ensure safe and healthful environments for all segments of the campus population, through programs of information and education, review and monitoring, technical consultation, and provision of direct services. OEHS is also responsible for developing programs to ensure compliance with applicable state and federal health, safety and environmental regulations, and campus policies on environmental health and safety. Areas of responsibility include hazardous materials, environmental management, and injury and illness preventionas highlighted in the University System of New Hampshire (USNH) Policy on Environmental Health and Safety. The protection of human health and compliance with applicable regulations are essential conditions for the successful operation of research, conduct of instruction, and provision of public service by the University. OEHS supports the University of New Hampshire's mission by providing leadership, resources, and services to assure a safe and healthful working environment for all members of the University and its surrounding community.

#### 3.0 Vision Statement

OEHS will be a valued partner in the creation and maintenance of a safe and healthy University environment and will achieve excellence through its provision of leadership, oversight, stewardship, and services.

#### 4.0 Core Values

OEHS has adopted a Code of Professional Conduct. These core values describe the standards to which we aspire. They guide our actions and help to assure accountability, responsibility and trust as we interact with one another and our campus clients.

**Excellence:** We dedicate ourselves to the highest standards of quality in our professional work, outreach, public service, mentoring, and advising.

**Integrity:** We commit ourselves to an open, honest, and trustworthy approach to all endeavors we are working on. We value fairness, straightforward conduct, adherence to the facts, sincerity and transparency. We will make a reasonable effort to provide appropriate professional referrals when unable to provide competent professional assistance.

**Responsiveness:** We respond to and address the needs and expectations of our students, faculty, staff, partners, and external constituents.

**Respect:** We foster an environment of mutual respect. We listen to each other, encourage each other and care about each other.

**Diversity:** We commit to an inclusive community for diverse students, faculty and staff. We reject bigotry, oppression, degradation and harassment, and we challenge injustice toward any member of our community.

**Accountability:** We are personally and organization ally accountable for all that we do and commit to providing timely and comprehensive evaluation of our programs and efforts.



Figure 1: UNH Wildcat Statue located in front of Whittemore Arena

**Innovation:** We want to be at the forefront of change and believe that the best way to lead is to learn from our successes and mistakes and continue to grow. We are forward-looking and break new ground in addressing important community and societal needs.

**Openness:** We encourage the open exchange of information and ideas from all quarters of the university community. We believe that through collaboration and participation, each of us has an important role in determining the direction and well-being of our community.

#### **5.0 Campus Program Elements and Objectives**

UNH has adopted an Environmental Health and Safety Mission Statement that works to assure safe and healthful environments for all segments of the campus population, through programs of information and education, review and monitoring, technical consultation, and provision of direct services. OEHS has developed and implemented programs to ensure compliance with applicable state and federal health, safety and environmental regulations, and USNH policies on environmental health and safety.

#### **6.0 Injury and Illness Prevention**

#### 6.1 Industrial Hygiene

Industrial hygiene is the art and science of the recognition, evaluation, and control of those environmental factors or stresses, arising in or from the workplace, which may cause sickness, impaired health and well-being, or significant discomfort and inefficiency among workers or citizens of the community. OEHS performs worksite assessments to determine potential health

hazards throughout the many locations associated with UNH and manages the campus Respiratory Protection and Hearing Conservation programs. Technical assistance is provided on issues involving chemical hazards that can contribute to exposure risks (including laboratory exposures), exposures as the result of chemical release incidents, noise, heat, and hazardous building materials. Advice is provided on protective measures that include the development and implementation of corrective controls or the use of personal protective equipment (PPE).

OEHS calibrates and maintains an inventory of thirty (30) direct reading/sampling instruments (Table 1).

Table 1 Direct Reading Instruments and Sampling Pumps Maintained by OEHS						
Instrument Make (# devices)	Model	Use Type	Calibration Frequency			
Jerome (1)	431-X	Mercury vapor analyzer	Annual factory calibration, operation verified weekly			
Sensidyne (5)	Gil-Air 3	Personal air sampler	Prior to and following use			
Gillian (8)	BDX	Personal air sampler	Prior to and following use			
RAE Systems (1)	MiniRae 2000	Photoionization detector	As-necessary, calibration verified weekly			
Industrial Scientific (1)	Ventis MX-4	Multi-gas monitor	As-necessary, calibration verified weekly			
Aeroqual (1)	Series 200	Ozone monitor	Annual factory calibration, operation verified weekly			
Aeroqual (1)	Series 200	Dust Monitor	Annual factory calibration, operation verified weekly			
Allegro Industries (2)	Rotary Vane Sampling Pump	High volume air sampling	Prior to and following use			
Simpson (1)	884-2	Sound level meter	Annual factory calibration, checked before use			
TSI (1)	P-Trak	Ultrafine particle analyzer	Annual factory calibration, operation verified weekly			
TSI (2)	Q-Trak with 966 (3 total) and 982 (2 total) probes	Indoor air quality, air velocity	Annual factory calibration, calibration verified weekly			
TSI (1)	9565-A	Air velocity	Annual factory calibration			
Quest 3M (1)	QT-32	Heat stress monitor	Annual factory calibration			
General (1)	MMD900	Moisture meter	As-necessary, checked before use			
Casella (3)	dBadge2	Noise dosimeter	Prior to use			

These instruments provide information relative to airborne constituents such as lead, asbestos, mold, particulates, and specific airborne chemicals.

OEHS responded to twenty-five (25) requests from the campus community for industrial hygiene

technical services in 2021. Inquiries were related to hazardous building materials, potential exposures to hazardous chemicals, heat, and noise.

Throughout the 2021 calendar year OEHS continued its efforts to evaluate potential hazardous exposures on campus for a variety of departments. These efforts included:

- An assessment of the Makerspace 3D SLP printer and proposed new laser cutter.
- The evaluation of potential noise sources at the Olson Manufacturing Center.
   Multiple operations were observed to create elevated noise levels such as the water jet cutter and shop equipment.
- A review of reproductive hazards for graduate students conducting research in James Hall.
- A review of multiple safety data sheets to evaluate potential risks during the use of hazardous chemicals during cleaning, sanitization, and floor servicing by Housing/Housekeeping. In addition, the review allowed for the proper selection of personal protective equipment for use by those handling and using chemical materials.
- Researching and reviewing data on particulate and poor air quality outside and providing guidance for the Kinesiology departments cardiac workout sessions, the result of western wildfires that impacted the northeast.

During the summer months, OEHS monitors the weather to support the UNH Excessive Heat Advisory Program (see UNH On-Line Policy Manual, UNH VD 3.5). A 3M QUESTemp wet-bulb globe thermometer (Figure 2) is placed outside to measure the outdoor heat. When the outdoor temperature exceeds the consensus threshold for heat as established by the American Conference of Governmental Industrial Hygienists, OEHS will issue a heat advisory for the campus. The Heat Advisory contains a prescription of work and rest for those employees, athletes, visitors, and/or guests who may be working outside, and, as necessary, for those working inside. OEHS issued a total of six (6) heat advisories throughout 2021, down one from the seven (7) advisories that were issues in 2020.



Figure 2: Quest Wet Bulb Globe Thermometer used by OEHS to monitor weather for health advisories

#### 6.1.1 Hazardous Building Materials

Hazardous building materials can be present in several forms throughout UNH campus buildings. Fortunately, the presence of these materials does not constitute a risk for occupants as long as the materials are maintained in good condition and their condition monitored on a regular basis. To assist in maintaining these materials OEHS oversees the Hazardous Building Materials Operations & Maintenance Manual that incorporates programs to manage the three more commonly associated materials: asbestos; lead; and polychlorinated biphenyls (PCB).

OEHS has been formally assessing all campus buildings for the presence of asbestos containing materials (ACM) and lead based paint since 2011. The assessment project was designed to identify suspected materials, and document their locations, quantities, and condition (see Figure 3). All known materials identified during the surveys are entered into UNH FAMIS and printed on work orders to alert Facilities personnel of the materials presence. FAMIS is an electronic asset management system utilized by UNH Facilities personnel for work orders and asset maintenance. In addition to the work orders, all employees whose jobs could put them in contact with ACM are required to participate in annual Asbestos Awareness training. This includes Housekeeping, Facilities Operations, Telecommunications, Facilities Project Management, and Housing. In 2021 OEHS conducted surveys for five campus buildings that include the Farm Machinery Building, Grounds and Events, Fish Hatchery, Central Heating/CoGen Plant, and the Browne Center, bringing to date a total of 86 campus buildings that have been formally surveyed for the presence of asbestos and lead with the respective data entered into FAMIS. During 2021 OEHS worked with Facilities Information Technologies to transition the inclusion of information from FAMIS into AIM, a new asset management system implemented by Facilities.

The Asbestos Operations & Maintenance Plan establishes responsibilities for specific operating groups that could encounter ACM as part of routine operations. The plan also outlines inspection procedures and frequencies, emergency procedures to follow in the event of a fiber release, and training requirements. Employees whose daily work routine requires possible contact with ACM, or who have related responsibilities are required to attend 2-hour Asbestos Awareness Training. In 2021, 71 employees participated in the 2-hour Asbestos Awareness training. To ensure identified materials are maintained in good condition, OEHS conducts visual inspections of all areas where known ACM are present. The conditions are documented annually, and each inspection record is maintained at OEHS. Copies of all inspections along with any recommendations are forwarded to the respective operating group responsible for the inspected building/area.



Figure 3: Example of flooring material that is known ACM located in the Iddles wing of Spaulding Hall

More recently, the presence of PCBs in caulking has created unique challenges for building renovation and/or demolition activities. Part of the Hazardous Building Materials Operations and Maintenance Manual includes the Caulking Management Plan. This plan was developed to outline specific procedures to be followed prior to and during construction-related projects wherecaulking materials may be impacted. In addition, the plan outlines additional procedures to be followed should caulking need to be impacted in an emergency (i.e. repair of a broken window).

OEHS works closely with Facilities Project Management during projects that require the abatement of lead, asbestos, or PCBs. Work involving abatement requires specific training and experience. To ensure only those qualified firms conduct hazardous building materials, OEHS, along with USNH Procurement Services, have approved term contractors for abatement, environmental engineering, industrial hygiene, and project oversite.

OEHS manages two PCB Monitoring, Maintenance, and Implementation Plans (MMIP) that were established as part of conditional approvals by the United States Environmental Protection Agency (USEPA) for the removal and replacement of windows associated with Stillings Hall and the Field House. Under each conditional approval, UNH is required to monitor locations where PCB contamination remains on an annual basis. The monitoring under each MMIP involves a visual assessment of each window for substrate damage, and the collection of air and wipe samples to evaluate the effectiveness of applied engineering controls.

#### 6.2 Injury Prevention

The effectiveness of a safety program can be assessed in many ways. However, it is typically reviewed from a financial perspective. UNH losses are analyzed by OEHS to evaluate the frequency (number of incidents) and the severity (cost associated with an injury). OEHS, in conjunction with UNH Human Resources (HR) and our Workers Compensation Insurance Carrier, Maine Employer's Mutual Insurance Company (MEMIC) monitors monthly trends and costs and

works to focus efforts on addressing those areas where a higher frequency and/or severity of accidents are occurring.

In 2021 UNH reported 181 incidents with 69 being compensable. A summary of the 2021 losses compared to the previous two years is provided in Table 2 below.

Table 2 Comparison of 2021 versus 2020 Losses							
Total Year Reported Ne		Net Paid Out	Reserves	Incurred Costs			
2021	181	\$163,000	\$143,000	\$306,000			
2020	171	\$105,000	\$65,000	\$170,000			
2019	293	\$301,000	\$142,000	\$443,000			

NOTE: Financial losses are reported as incurred costs that include both the actual costs paid to date (Net) and any potential future costs and reserves (Reserves). Actual losses can fluctuate both up and down based on the claim and settlement.

As summarized in Table 2, 181 incidents were reported through the online UNH chemical and environmental management system (UNHCEMS®) to the OEHS staff and HR, of which 57 were report-only (meaning no significant injuries or medical treatment was required and therefore *non-compensable*). Of the remaining 124 reported incidents, 55 required basic first aid and 61 required medical treatment. As a result, the compensable injuries yielded approximately \$306,000 in losses. These numbers are up when compared to 2020 where UNH experienced171 incidents that resulted in approximately \$170,000 in financial losses. This is a 6% increase in total reported incidents and a 56% increase in losses. Figure 4 summarizes UNH claims andmonetary losses for the previous thirteen years.

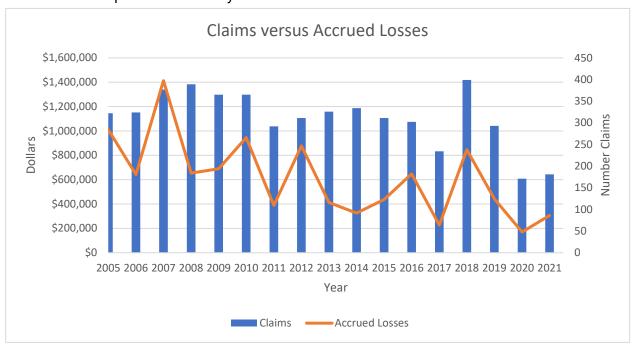


Figure 4: Total workers compensation claims versus losses paid over last 15 years at UNH.

It must be noted that financial losses are reported as incurred costs that include both the actual costs paid to date and any potential future costs and reserves. Actual losses can fluctuate both up and down based on the claim and settlement. The sum of total paid losses for 2021 are approximately \$163,000 with an approximate \$143,000 being held in reserves.

A second means to evaluate the effectiveness of an existing safety program is reviewing the experience modification rate (MOD-rate). The MOD-rate is a multiplier provided by the National Council on Compensation Insurance (NCCI) that is applied to an employer's workers compensation insurance premium. An employer with a strong safety record will have a MOD-rate of under 1 reducing the actual cost of insurance while those with weak safety records will have a MOD-rate in excess of 1. UNH's MOD-rate in 2021 was reported by NCCI as 0.70 which is slightly lower than 2020 when it was reported as 0.78.

OEHS conducts routine accident investigations to determine the root cause of an accident and develop corrective actions as necessary to prevent a reoccurrence. Many investigations involve a simple telephone call or e-mail requesting information on recommended corrective actions while more frequent or significant accidents involve a more formal site visit, interviews, and assistance from various operating groups. These are followed up with a more formal investigation report. In 2021 OEHS conducted 12 formal investigations.

#### 6.3 Indoor Environmental Quality

OEHS investigates indoor environmental quality (IEQ) complaints and concerns filed by campus community members. While most complaints involve thermal comfort, odors, or non-specific symptoms, some are associated with reports of microbiological contamination/growth, specific health-related symptoms related to indoor air, or response to a water intrusion. Indoor Air Quality (IAQ) surveys and due diligence assessments are conducted following routinely practiced industry standards for the investigation of IEQ complaints. OEHS manages the UNH Indoor Air Quality Management Plan and conducts/coordinates evaluations; maintains two direct reading instruments to monitor basic IEQ parameters, two moisture survey meters to evaluate for damp conditions that can be conducive for microbiological growth, and an ultrafine particle analyzer (Figure 5) that can be used to assess for dusts/particles and determine their source.







Figure 5: TSI Q-Track IAQ Monitor, General Moisture Meter, TSI P-Trak Ultrafine Particulate Counter

In 2021, OEHS responded to seventy-six (76) requests for IEQ services, up from the forty-four(44) in 2020 (Figure 6). Three (3) request required remediation or corrective actions while OEHS requested assistance from IAQ consultants on five (5) occasions. Remedial efforts were funded primarily by the affected departments while the external sampling efforts were funded through the Environmental Health & Safety (EH&S) Mitigation Fund established in 2009. During 2021 OEHS saw a significant increase in the number of mold concerns in dorms. Of the 76 IAQ complaints, 45 were directly associated with concerns related to mold in UNH dorms. While most of the concerns did not identify a source of mold, 4 buildings underwent cleaning to remove microbial contamination.



Figure 6: Indoor Environmental Quality Requests Received by OEHS from 2011 through 2021

#### 6.4 Occupational Safety

The safety programs at UNH focus efforts on injury prevention through the development and implementation of policies and procedures for the recognition and identification of hazards and the development of corrective actions. OEHS works with campus stakeholders on issues of safety to assist in assuring compliance with applicable regulations, regulatory interpretation, and by providing technical assistance. In 2021, OEHS responded to thirty-seven (37) requests for technical assistance on a broad range of safety topics including: walking and working surfaces; respiratory protection; PPE; cranes and hoists, contractor safety; fire safety and prevention; emergency action planning; confined space entry; fall protection; the control of hazardous energy (lockout/tagout); welding and cutting; fuel handling; electrical safety; powered industrial trucks; and Mobile Elevating Work Platforms (MEWP). This is up when compared to twenty-five requests in 2020.

OEHS conducted an annual review of each of its thirteen written Occupational Safety Programs in 2021 to address any regulatory changes in the programs and for any operational questions or concerns from impacted campus representatives. The following documents are reviewed and maintained by OEHS Occupational Safety:

- Respiratory Protection Program
- Hearing Conservation Program
- Lockout/Tagout
- Hot Work Permit
- Confined Space Entry
- Powered Industrial Trucks
- ACM Operations and Maintenance Plan

- Fall Protection
- Crane & Hoist Safety Program
- Caulking Management Program
- Hazard Communication Program
- Indoor Air Quality Management Plan
- Mobile Elevating Work Platform (formerly Aerial Lift Safety Program)

#### 6.4.1 Confined Space Entry

The UNH Confined Space Entry Program is designed to outline specific requirements and procedures to allow employees to safely enter and conduct work in spaces that have been identified, as permit required confined spaces. These procedures include training, air monitoring, the use of specific equipment to facilitate non-entry rescue, and the use of a permit entry system. OEHS receives, reviews, and maintains all permits for activities involving entry into UNH confined spaces. Figure 7, below, is an example of a confined space at UNH.

In 2021, OEHS received seventeen (17) confined space entry permits. Permits are reviewed and if necessary, field verified on campus to ensure personnelare entering following current UNH program requirements. In addition, permits are reviewed witheach applicable operating group as part of the annual program review and assessment. OEHS and UNH continue to partner with the Durham Fire Department (DFD) to provide confined spaceentry rescue services.







Figure 7: Equipment identified as a Permit Required Confined Spaces

OEHS has identified and inventoried 625 confined spaces on the UNH Durham campus. Recent demolition/renovation activities on campus have reduced the number of spaces down from 641 in 2020. Thesespaces include sewer manholes, tanks, pits, and vaults. The UNH Confined Space Inventory is managed in the Confined Space Inventory Database (CSID) accessed from the UNH OEHS web site. As part of the CSID trained employees and contractors can access information regarding the hazards of identified spaces, complete, and submit entry permits electronically.

In 2021 OEHS was contacted by Campus Energy and Facilities to evaluate entry procedures into the wood chip vault located within the Northwest Heating Plant. The space had no provisions for entrants for fall protection and non-entry rescue. OEHS worked with those responsible for entry into the vault and an outside engineering firm to design and install the appropriate safety devices. This was completed in the fall of 2021.

During 2021 OEHS worked with faculty and students in the Environmental/Civil Engineering department to safely access sewer manholes as part of their research on COVID and waste streams. OEHS evaluated each space prior to, and during opening to monitor for combustible vapors and hydrogen sulfide. This was conducted during waste stream sampling and dye testing.

#### 6.4.2 Fall Protection

OSHA requires that any employee exposed to a fall of four (4) feet or more be protected by means of protective measures. Fall hazards exist for any employee required to work on, in, or near roof systems, aerial lifts, scissor lifts, scaffolding, unprotected attic spaces, open pits, floor holes, or elevated walkways and platforms. The UNH Fall Protection Program outlines specific controls to be utilized when fall hazards exist. While the OSHA fall protection standards (29 CFR 1926, Subpart M and 29 CFR 1910, Subpart D) specify three methods to protect employees from falls; safety nets, the use of guardrails, and/or personal fall arrest systems; the UNH program recognizes only two, the use of guardrails and personal fall arrest systems. As part of the program OEHS conducts annual documented inspections of approximately 100 full body harnesses and lanyards located on campus that are used as part of a personal fall arrest system to protect employees against falls from elevated surfaces. Employees exposed to fall hazards receive training on the recognition of fall hazards and the use of protective systems.

In 2021 OEHS was involved in the review and design for a fall protective system for the new Health Sciences Simulation Center. Figure 8 shows an example of a fall protective system installed on Kingsbury Hall.



Figure 8: Guardrails installed on the roof of Kingsbury Hall

#### 6.4.3 The Control of Hazardous Energy (Lockout/Tagout)

Lockout/Tagout can be defined as the complete physical isolation of all energy sources associated with a piece of equipment or machinery to ensure an employee conducting servicing or maintenance is not exposed to any hazardous energy sources through the accidental startup of the equipment or machinery or release of stored energy. To achieve this, OSHA has established its Control of Hazardous Energy (Lockout/Tagout Standard) 29 CFR 1910.147. To ensure UNH Compliance with the OSHA standard, the UNH Lockout/Tagout Program outlines the proper shut down and isolation procedures required prior to any servicing or maintenance activities. Employees conducting servicing or maintenance must identify all hazardous energy sources and once identified, they are shut down and physically isolated by the application of a lock on the isolation device (lockout). In addition, each lock is required to have a tag applied to it (tagout) that clearly specifies not to remove as lockout/tagout taking place. Each applied lock and tag is to be applied by each person conducting servicing or maintenance on each energy source required to be isolated. The UNH Lockout/Tagout program applies to all UNH employees to some degree. The selected Facilities personnel that would be required to shut off equipment and/or machinery and conduct servicing or maintenance activities are considered authorized employees and receive specific training on the program elements. All other employees are considered affected as the work an authorized employee conducts could at any time affect anyone.

#### 6.4.4 Powered Industrial Trucks

The UNH Powered Industrial Truck (PIT) Program outlines the practices and procedures to ensure the safe use and operation of PITs at UNH, formalize the required inspections, and outlinespecific training requirements for those required to operate them. PITs are a valuable tool for material handling, buttheir use is not without risk. The OSHA Powered Industrial Truck standard, 29 CFR 1910.178 outlines specific requirements employers must follow to ensure theirsafe use. UNH currently has an inventory of thirteen (13) PITs that encompass three of the seventruck classes. They include two class II trucks that are used in Facilities Warehousing (Figure 9) and Chase Ocean Engineering, seven class III powered hand jacks that are used in Facilities Warehousing and Dining Services, and four class V trucks that are used in Facilities Warehousing, College of Engineering & Physical Sciences (CEPS), Campus Recreation, and the Coastal Marine Center. The class of PIT is designated based on their use and fuel source. Nine of the PITs at UNH are battery powered, three are powered by liquefied propane gas (LPG), while one is diesel fuel operated. Each class has specific operational characteristics, fueling/chargingrequirements, and inspection criteria that must be followed. In addition, training is required to include both formal instructions, practical hands-on training, and is complete when each operatorsuccessfully passes an operator evaluation for each PIT they would be required to operate. The PIT program standardizes how each truck is managed, including training and inspections.



Figure 9: Typical Powered Industrial Truck in use at UNH

#### 6.4.5 Cranes and Hoists

UNH currently has an inventory of thirty (30) operational cranes and hoists that service a variety of programs and departments on campus. They include the largest crane, a 10-ton bridgecrane in Kingsbury Hall, to smaller cranes and hoists used by Facilities, the Dairy Farm, Jackson Estuarine Laboratory, and the Coastal Marine Center in New Castle New Hampshire. During 2021 UNH acquired five 5-ton bridge cranes at the Olson Manufacturing Center while two hoists were installed at the new Water Treatment Facility. Formal training requirements, inspection procedures, and responsibilities are outlined in the UNH Craneand Hoist Safety program.

#### 6.4.6 Mobile Elevating Platforms (formerly Aerial/Scissor Lifts)

A Mobile Elevating Work Platform (MEWP) can be defined as any vehicle mounted device, vertical, telescoping or articulating, or both, that is used to position personnel. Scissor lifts are considered a mobile-railed platform that can be raised straight up and down. Regardless of the definition, UNH departments, including Facilities Operations, Athletics, Memorial Union Building, the College of Liberal Arts (COLA), Campus Recreation, and Housing utilize both types of MEWPs for a variety of purposes.

The UNH MEWP Safety Program has several key elements that define responsibilities for those operating groups on campus that utilize them, establishes specific training requirements, and outlines limitations when it comes to non-UNH personnel (such as contractors). One of the significant components of the program is restricting MEWP use to only those trained and qualified UNH operators. A second key component is the establishment of training requirements for operators. Training is divided into two categories, Qualified/Competent Person Training and Restricted Person Training. Those employees that receive operator training and have experience and qualifications to safely utilize MEWPs are considered Qualified/Competent users. This allows them to utilize MEWPs in an unrestricted manner on campus. Restricted Persons are those that

have received operator training however lack any use experience. These employees can utilize MEWPs however their use requires oversite by a Qualified/Competent user. By dividing it up into two categories it allows key departments to utilize their own Qualified/Competent users to not only train their own personnel, but to decide when a Restricted Employee can become a Qualified/Competent user. In 2021 OEHS conducted training for the Environmental and Civil Engineering department to allow lift usage by faculty and staff during research conducted in Gregg Hall.

#### 6.4.7 Workplace Safety Inspections

OEHS conducts routine inspections of campus locations to evaluate for the presence of hazardous conditions and works with campus groups to develop corrective measures. Inspections are conducted to identify hazards and work with management develop corrective actions and address observed unsafe behavior practices. By continually observing for both unsafe conditions and unsafe behaviors of employee's, efforts can be made to remediate hazards and correct unsafe actions through targeted training.

#### 6.4.8 Hearing Conservation

Exposure to elevated noise levels that exceed exposure thresholds can lead to a temporary or permanent threshold shift that can result in noise induced hearing loss. OSHA has established the Occupational Noise Standard, 29 CFR 1910.95, which requires employers to develop and implement a Hearing Conservation Program should it have employees that exceed the established action level of 85 decibels as averaged over the course of an 8-hour day. Since there are areas/jobs at UNH where noise levels can exceed not only the Action Level, but the permissible exposure limit (PEL) of 90 decibels, OEHS manages the campus Hearing Conservation Program. For those impacted employees the program requires they receive training on the components of the program, the OSHA Standard, effects of noise exposure, and the appropriate use of hearing protection. In addition, each employee included in the Hearing Conservation Program is required to participate in baseline and annual audiometric testing. This testing is coordinated through the UNH College of Health and Human Services and is conducted at Hewitt Hall while training is conducted by OEHS.

Currently Grounds and Events are participants in the Hearing Conservation Program. In 2021 OEHS initiated efforts to evaluate noise levels in the Olson Manufacturing Center and anticipates continuing this effort throughout 2022.

#### 6.4.9 Respiratory Protection

Use of respirators at UNHis governed by a comprehensive OSHA Standard, 29 CFR1910.134 Respiratory Protection which outlines specific requirements that must be met prior to andduring use. OEHS manages the campus Respiratory Protection Program to ensure employees are properly protected against potential airborne contaminants as well as UNH's compliance with the OSHA standard. A respirator acts as a barrier preventing hazardous airborne contaminants from entering the body through the respiratory system. Contaminants can be physical, chemical, or biological in nature. For a respirator to be effective, it must be used following strict guidelines and procedures to ensure proper selection, use, care, and maintenance. In addition, all wearers of respiratory protection are required to participate in the UNH Medical Surveillance program and be fit tested annually. The fit test is the procedure where the employee dons the respirator they would be required to use and is challenged with a known agent. Should the employee detect the challenge agent, the respirator is not approved for use. Only those respirators that achieve an acceptable fit will be worn by employees. OEHS conducts training for a variety of departments that are covered by the respiratory protection program. These include Facilities Operations, Health and Wellness, and the NHVDL.

In 2021, the Respiratory Protection Program continued to expand to address the COVID- 19 pandemic which included coordinating medical surveillance, conducting training, and fit testing for a multitude of operational groups. Groups which needed expanded services included the COVID Testing Laboratories (Durham and UNH Manchester), College of Health and Human Services, Athletics, the College of Liberal Arts (COLA), and the UNH Police Department. In 2021 an additional 202 personnel participated in the medical surveillance program with 378 UNH Personnel receiving fit tests for respirator use.

#### 6.4.10 Hazard Communication

The use of hazardous chemicals in the workplace is highly regulated to ensure those working with chemical substances do so in a safe manner. Using hazardous chemicals can place UNH employees and students at risk of exposures that can lead to physical injuries and/or illnesses. One of the programs developed and managed by OEHS is the Hazard Communication Program. This program is mandated by the OSHA Hazard Communication Standard, 29 CFR 1910.1200 and the State of New Hampshire Department of Labor Right to Know Law, Title XXIII, Chapter 277-A, Toxic and Hazardous Substances.

The Hazard Communication Program is designed to provide information to those who use or those who could be potentially exposed to chemical substances. The UNH Hazard Communication Program prescribes procedures for appropriate labeling of chemical containers, maintaining a comprehensive inventory of chemical materials at UNH, and ensuring that corresponding Safety Data Sheets (SDSs) are readily available for inventoried materials. In addition, training is provided on the provisions of the UNH Hazard Communication Program for

all employees working with regulated chemicals. Hazard communication training was completed by 392 individuals in 2021. Facilities Division employees receive Hazard Communication training during their OEHS Orientation while others receive it while participating in laboratory safety programs.

UNH manages its chemical inventory and maintains over 65,000 SDSs electronically in UNHCEMS<sup>®</sup>. OEHS conducts an annual chemical inventory and is continually updating its compilation of SDSs to ensure the most up to date and accurate information is available.

#### 6.4.11 Hot Work/Welding Safety

OEHS continues its advisory and administrative role for the Hot Work Permit Program. This program is designed to require those personnel who are required to perform welding, torch cutting, or any other heat and spark producing activities outside a designated hot work area to complete a Hot Work Permit (Figure 10). The program offers two options for hot work:

Option 1 - Those conducting hot work can opt to complete a single shift permit, which authorizes hot work for the single date specified on the permit. Completed by the UNH Facilities Project Manager and/or the Competent Hot Work Supervisor, the permit is forwarded to OEHS prior to the commencement of activities.

Option 2 - The second option available is to request a blanket permit. A blanket permit can be submitted to OEHS and will be reviewed on site with the appropriate UNH and/or contractor personnel. Once reviewed, the blanket permit is signed and approved. The blanket permit can be used for a time not to exceed 14 calendar days.

In 2021, OEHS received ninety-one (91) single shift hot work permits and reviewed two (2) blanket permit requests that were subsequently approved.

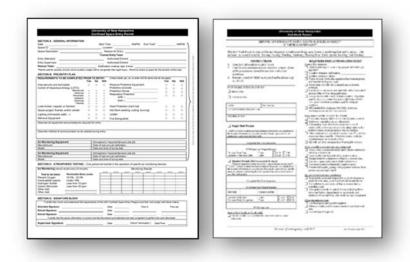


Figure 10: Sample Confined Space and Hot Work Permit Request forms

#### 6.4.12 Construction Safety

OEHS provides technical guidance to UNH project managers on environmental health and safety concerns during construction, demolition, and renovation projects. Services include minor technical inquiries, pre-construction plan review, and pre-demolition hazardous building materials abatement planning. In 2021, staff from all disciplines in OEHS participated in projects associated with Spaulding Hall; Transportation Building; Telecommunications; Dimond Library; Rudman Hall; Health Sciences Simulation Center; Kendall Hall; Barton Hall; Field House; McGregor Ambulance Building; University of New Hampshire at Manchester (UNH-M); and exterior locations involving utility upgrades throughout campus.

#### 6.4.13 Occupational Safety Committee

The UNH Occupational Safety Committee assists with setting forth health and safety policies and programs that are adopted and implemented within the affected departments. The Occupational Safety Committee is a joint labor-management committee and is a vehicle through which the campus community can discuss safety concerns, disseminate information about programs and services from OEHS, and develop initiatives for future health and safety efforts. The Occupational Safety Committee incorporates representation from, Research Integrity Services, Housing, Campus Recreation, Athletics, Information Technology, Hospitality Services, Health &Wellness, Human Resources, Campus Stewardship; University Libraries, and the UNH Police Department (PD). OEHS coordinates and schedules the quarterly meetings, develops meeting agendas, and records and generates meeting minutes.

#### 6.5 Safety Training and Education

Safety training is routinely performed and/or coordinated for those affected faculty, staff, and students on a variety of topics that include Hazard Communication, PPE, Respiratory Protection, Hearing Conservation, Control of Hazardous Energy (Lockout/Tagout), Confined Space Entry, Fall Protection, Asbestos Awareness, Material Handling, and Ergonomics. The responsibility for ensuring that affected staff receive the appropriate training falls under each individual department. OEHS offers training services that are pre-arranged with the affected departments.

Throughout 2021, OEHS continued its efforts to promote training to targeted areas where increased losses were occurring and to ensure compliance with regulatory training requirements. As part of their annual Associates Day, OEHS continued its partnership with Dining Services to address hazards and their controls associated with slips, trips, and falls, ergonomics/back/lifting safety, and cuts and burns. OEHS continued to provide training for the UNH Facilities Division by targeting specific areas that affect their operations that included the two-hour asbestos awareness training and the Facilities OEHS Orientation. In 2021 OEHS implemented the OEHS Housing Orientation designed to target those areas of risk for both full and part time Housing staff members. OEHS continued its partnership with Housekeeping to provide them with the annual asbestos awareness training.

In 2021 3,424 employees and/or students participated in various instructor led and on-line OEHS training. Training was conducted on a variety of OEHStopics that include, but are not limited to Fall Protection, Confined Space Entry, Lockout/Tagout, Respiratory Protection, Bloodborne Pathogens, Radiation Safety, Laboratory Safety, and Oil SpillResponse.

#### 6.6 Ergonomics Programs

OEHS promotes its proactive approach to ergonomics by providing guidance to the campus community on ergonomic-related risks to reduce the number of claims involving musculoskeletal disorders associated with poor workstation design and manual material handling.

OEHS conducted twenty-eight (28) workstation evaluations in 2021. Each evaluation consists of the following:

- Reviewing the employee's workstation.
- Discussing work processes and symptoms they may be experiencing.
- Adjusting and/or modifying the workstation; and
- Discussing with them proper body positioning.

In 2021 OEHS continued with assisting individuals virtually to address concerns related to working remotely. Virtual assessments can be conducted utilizing photo's, Zoom, and/or facetime.

Each assessment is followed up by a formal report that not only summarizes our observations and modifications but includes additional recommendations to further reduce ergonomic risk factors. Simple modifications may include adjusting the employee's chair height, repositioning the keyboard to an existing adjustable tray, or raising the monitor utilizing materials readily at hand such as books or reams of paper. More complex recommendations may include replacement of existing keyboards and mouse options, re-design of work processes to reduce repetitive motions or replacement of desks and chairs. Table 3 and Figure 11 summarizes the ergonomic losses dating back ten years. UNH experienced three (3) injuries associated with computer workstations in 2021 resulting in approximately \$33,000 in losses. In addition, UNH experienced seventeen (17) injuries associated with manual handling and lifting resulting in approximately \$102,000 in losses.

Table 3 Losses (Claims) and Incurred Costs as a result of Ergonomic-Related Injuries at UNH										
Year	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Claims	10	3	1	3	2	5	9	18	19	20
Incurred Costs	\$27,555	\$4,892	\$384	\$15,603	\$10,775	\$3,994	\$42,000	\$61,800	\$29,573	\$135,000

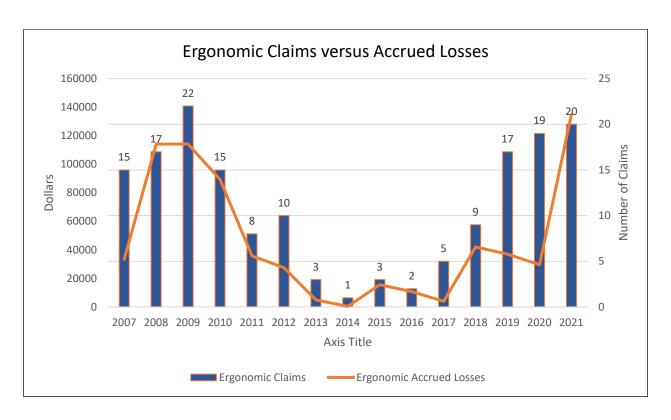


Figure 11: Ergonomic Claims from 2007 through 2021 compared with Accrued monetary losses over time

OEHS continued to field many employee requests for information on sit-to-stand workstations (Figure 12), their purchase, and installation. This ergonomic trend has been shown to increase employee productivity and overall wellness. During 2021 sit to stand desk standards were incorporated into the UNH Planning, Design, and Construction Guidelines.



Figure 12: Example of a type of Sit-to-Stand workstation at UNH

#### 6.7 Occupational Health Medicine

OEHS provides guidance to affected departments on medical surveillance requirements for faculty, staff, and students as required by state or federal regulations or as indicated by best management practices. Medical surveillance programs are established for respiratory protection, hearing conservation, asbestos, bloodborne pathogens and animal handlers. The management of the Animal Handlers Medical Surveillance Program and participant follow up is now under the responsibility of Research Integrity Services.

There are currently 816 faculty, staff, students and visitors participating in medical surveillance programs at UNH. As displayed in Figure 13, the number of staff enrolled in medical surveillance programs has increased when compared to 2020. In 2021, COVID-19 resulted in the need to enroll 202 additional employees into the respiratory protection program.

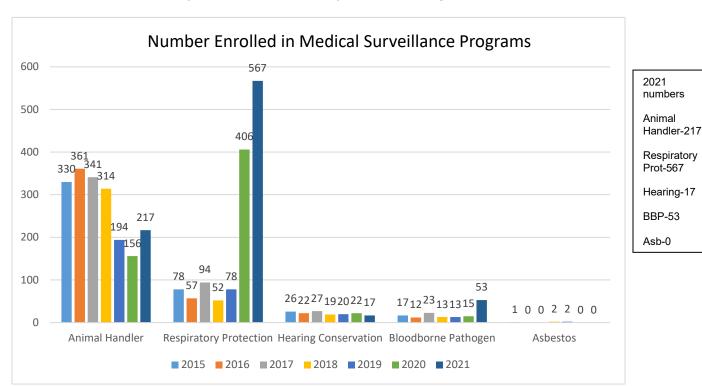


Figure 13: Number enrolled in Medical Surveillance programs from 2015 through 2021

#### 6.8 Emergency Procedures

#### 6.8.1 Emergency Procedures Program

It is the policy of UNH to maintain a safe environment for its students, academic appointees, staff, and visitors, in an atmosphere that encourages those individuals to communicate on occupational and environmental health and safety matters without fear of reprisal. The UNH Emergency Procedures Program (EPP) is required by OSHA and outlines procedures to be followed by the campus community for responding to, and recovering from, a variety of emergency and disaster situations. The purpose of the EPP is to facilitate and organize employer and employee actions during workplace emergencies. A well-developed emergency plan and proper employee training (such that employees understand their roles and responsibilities within the plan) should result in fewer and less severe employee injuries and less structural damage to campus facilities during emergencies. These events may include fires, hazardous spills, earthquakes, bomb threats, or major accidents.

Since 2016, the UNH Police Department has been the responsible for Emergency Management, including the EPP..

#### 7.0 Diving Safety

Scientific diving is defined by OSHA regulations as diving performed solely as a necessary part of a scientific, research, or educational activity by employees whose sole purpose for diving is to perform scientific research tasks. UNH is exempt from the regulations that govern commercial diving activities provided its program is defined as scientific diving and which is under the direction and control of a diving safety program containing at least the following elements:

A diving safety manual that includes at a minimum: Procedures covering all diving operations specific to the program; procedures for emergency care, re-compression and evacuation; the criteria for diver training and certification; and a diving safety officer.

The Diving Control Safety Board (with the majority of its members being active scientific divers) which shall, at a minimum, have the authority to: approve and monitor diving projects; review and revise the diving safety manual; assure compliance with the manual; certify the depths to which a diver has been trained; take disciplinary action for unsafe practices; and assure adherence to the buddy system (a diver is accompanied by and is in continuous contact with another diver in the water) for Self-Contained Underwater Breathing Apparatus (SCUBA) diving. UNH has implemented both of these elements and is in compliance with this exemption.

The following are statistics with regard to the Diving Program at UNH:

- Number of Divers logging dives during 2021: 34
- Total Number of Dives logged during 2021: 697
- Total minutes of diving logged during 2021: 23062

Tables 4 through Table 9 summarizes various dive statistics, including purpose for dives, modes of diving, breathing gas types used, and equipment.

Table 4 Number of Dives distributed by Purpose in 2021						
Purpose	Dive Time in Minutes	Dives Logged	Number of Divers Logging Dives			
Scientific	14,496	404	30			
Training and Proficiency	8,566	293	21			
Shoal's Marine Lab Dives	No dives due to COVID precautions					

Table 5 Number of Dives by Diving Mode in 2021						
Diving Mode	Dive Time in Minutes	Dives Logged	Number of Divers Logging Dives			
Open Circuit SCUBA	23,062	697	34			
Hookah	0	0	0			
Surface Supplied	0	0	0			
Rebreather	0	0	0			

Table 6 Number of Dives by Breathing gas in 2021			
Type of Breathing Gas	Dive Time in Minutes	Dives Logged	Number of Divers Logging Dives
Air	23,062	697	34
Nitrox	0	0	0
Mixed Gas	0	0	0

Table 7 Number of Dives by Decompression Profiling Method in 2021						
Decompression Method	ethod Dive Time in Dives Logged Logging Dive					
Dive Tables	2,335	84	6			
Dive Computer	20,727	613	34			
PC-based Deco Software	0	0	0			

Table 8 Number of Dives by Specialized Diving Environment in 2021					
Diving Environment	Dive Time in Minutes	Dives Logged	Number of Divers Logging Dives		
Required Decompression	0	0	0		
Overhead Environment	0	0	0		
Blue Water	0	0	0		
Ice/Polar	0	0	0		
Saturation Diving	0	0	0		
Aquarium Diving	0	0	0		

Table 9 Number of Scientific or Training/Proficiency Dives by American Academy of Underwater Science					
Dive Depth	Dive Time in Minutes	Dives Logged	Number of Divers Logging Dives		
0 - 30 feet	13,568	364	35		
31 - 60 feet	8,571	303	32		
61 - 100 feet	866	28	13		
101 - 130 feet	57	2	2		
131 - 150 feet	0	0	0		
151 - 190 feet	0	0	0		
190 - > feet	0	0	0		

There were no diving incidents reported in the 2021 cycle.

In addition to the scientific diving/AAUS listed above UNH runs several Academic open water scuba classes each semester-the diving for that is as follows:

Basic Open Water Scuba Classes for Spring(14 students) & Fall 2021(16 Students) for a
total of 30 Basic Students with approximately 20 hours of training in the pool for each
student leading to 4-5 open ocean dives each. Additionally, approximately 150 ocean
Student dives were conducted.

# 8.0 Disaster and Emergency Preparedness

OEHS reviews and updates Disaster and Emergency Response plans required by the United States Environmental Protection Agency (US EPA) for the Campus. OEHS is responsible for maintaining the Integrated Contingency Plan (ICP), Spill Prevention Control and Countermeasure Plans (SPCC) (40 CFR Part 112) and reporting to US EPA for Emergency Planning and Community Right to Know Act (EPCRA) Superfund Amendments and Reauthorization Act Title III (SARA Title III).

OEHS at UNH manages spill prevention plans for the following facilities:

- UNH Durham Integrated Contingency Plan
- Combined Heat Plant, Durham Campus SPCC
- Rochester Natural Gas Facility SPCC
- Durham Water Treatment Plant SPCC

OEHS at UNH files and manages EPCRA Tier II reporting for the following facilities:

- UNH Durham
- Shoals Marine Laboratory Appledore Island Maine
- Rochester Natural Gas Facility- Rochester NH
- Goss Manufacturing Building Durham NH
- C&C Dimes/EnviroVantage Warehouse Northwood NH

Reporting and plan maintenance for each is described in greater detail in the following sections.

# 8.1 Integrated Contingency Plan

The US EPA National Response Team passed guidance in 1996 allowing facilities to prepare an emergency response plan (the 'one plan') that consolidates the multitude of response plans required by several federal agencies including: the US EPA; OSHA; the Department of Transportation (DOT); the Mineral Management Service; the United States Coast Guard; and the

Research and Special Programs Administration.

UNH originally drafted the ICP for the Durham campus in 2009 and continues necessary revisions to the campus ICP as needed or, at a minimum an internal review is conducted on an annual basis. The current plan is dated and stamped by a licensed Professional Engineer (PE) and was last formally updated in June 2019. This plan requires a formal review and update be approved by a licensed PE every 5 years, or earlier if conditions change at the Facility that will materially affect the plan. In June 2019, an Amendment to the ICP was submitted by a PE due to the addition of portable emergency generators to the University's storage tanks. OEHS anticipates the next formal update of the UNH ICP will be in June 2022 due to changes in oil storage that materially affect the plan.

The intent of the UNH ICP is to establish the necessary procedures and equipment required to prevent and to minimize hazards to public health, safety, or welfare, or to the environment, from fires, explosions, spills or any other unplanned sudden or non-sudden release of hazardous materials to air, soil, surface water, or groundwater. The plan is also designed to prevent spills or releases of hazardous substances that violate applicable water quality standards, cause a sheen upon or discoloration of the surface waters, or cause a sludge or emulsion to be deposited beneath the surface of the water or upon adjoining shorelines.

This plan contains three main sections: General Information, Spill/Release Response Procedures, and Spill/Release Prevention.

- Section I General Information describes UNH's facilities and the administration of this plan,including procedures for the distribution, periodic review, and amendment of the plan.
- Section II –Fire, Explosion, or Spill/Release Emergency Response Procedures identifies
  and establishes the response and notification procedures to be used in the event of a
  spill/release, including steps to be taken when a spill/release is discovered; how to report
  a spill/release; guidance on mitigation and cleanup of a spill/release and disposal of
  related waste; and a description of spill/release response equipment maintained by UNH.
- Section III Fire, Explosion, or Spill/Release Prevention identifies and establishes policies and procedures to be implemented with the goal of reducing the potential of a spill/release, including: a detailed description of areas of the facility where oil, petroleum products and hazardous materials and wastes are used, stored and generated; the associated containment systems; a description of the potential environmental receptors that may be affected; procedures for inspecting storage areas or equipment containing oil or hazardous waste; delivery/storage procedures; and a discussion and assessment of the potential spill/release scenarios.

The areas of the University of New Hampshire property that are covered by the ICP include:

- Durham campus;
- UNH Central Hazardous Waste Accumulation Area (CHWAA);

- Satellite Accumulation Areas in laboratories and research facilities throughout campus;
- UNH Facilities including the Heating Plant and shops;
- Transportation Garage;
- All other perimeter farms in Durham with the contiguous property boundaries of UNH Durham campus;
- Residential housing for college students and employees (single-family residences are exempt when oil is used exclusively for on premise heating); commercial properties owned or partially owned by the UNH, and situated contiguous to the main campus in Durham; and
- Other miscellaneous properties owned by the University of New Hampshire, with property boundaries contiguous to the Durham campus.

Due to their limited onsite storage of regulated materials, the Shoals Marine Laboratory (Appledore Island, Maine), Coastal Marine Laboratory (New Castle, New Hampshire), Burley-Demeritt Farm (Lee, New Hampshire), Kingman Farm (Madbury, New Hampshire) and UNH-M do not have formal SPCC or ICP plans. Although law does not require formal plans for fuel or hazardous materials spill responses at these locations, OEHS continues to monitor petroleum and hazardous materials storage and manages them as a best practice in accordance with US EPA and NHDES regulations.

OEHS provides oversight and training relative to spill prevention control and counter measures plans developed for the UNH Durham Campus Central Heating Plant, the Durham-UNH Water Treatment Plant, and the Landfill Gas Processing Facility in Rochester New Hampshire.

The SPCC plan for the Central Heating Plant was last certified in December 2019. The SPCC plan for the Water Treatment Plant certified in June 2020. The Landfill Gas Processing Facility in Rochester New Hampshire has an SPCC plan last certified in August 2019.

# 8.2 Spill Prevention Control and Countermeasure (SPCC) Planning

The priority of the US EPA Emergency Management Program is to prevent, prepare for, and respond to oil spills that occur in and around inland waters of the United States. US EPA is the lead federal response agency for oil spills occurring in inland waters, and the United States Coast Guard is the lead response agency for spills in coastal waters and deep-water ports. The SPCC rule provides requirements for oil spill prevention, preparedness, and response to prevent oil discharges to navigable waters and adjoining shorelines. The rule (40 CFR Part 112) requires facilities that meet specific petroleum storage quantities to prepare, amend, and implement SPCC Plans.

UNH maintains certified SPCC plans for the Combined Heat and Power Plant, the Town of Durham Water Treatment Plant, and the UNH Landfill Gas Processing Facility in Rochester. The plans for the Durham Water Treatments Plant was last updated in YY2021; the UNH Landfill Gas Processing Facility and the Combined Heat and Power Plant were both reviewed by a licensed 2021 Annual Report for the UNH Office of Environmental Health and Safety

Professional Engineer and revised in 2019.

In place of an SPCC for the Durham Campus, an ICP has been developed and maintained for UNH as discussed in section 8.1 above. The completion of the certified ICP meets the US EPA requirement for a spill prevention plan (40 CFR Part 112)

UNH Facilities staff conducts monthly inspections of the 55 aboveground oil storage tanks (ASTs) on campus and 8 registered transformers, with an additional 104 transformer inspections occurring annually, as conducted by the UNH Energy office. There are several factors determining which equipment is inspected and at what frequency and is in part defined by the facility ICP, SPCC and or NHDES regulations.

Per US EPA SPCC regulations (as detailed in the ICP), OEHS conducted in-person training for 86 UNH staff and contractors have received an awareness level for prevention of oil discharges and reporting and response procedures. Nine UNH personnel are identified as oil handling personnel and receive training for the operation and maintenance of equipment to prevent oil discharges; discharge procedure protocols; applicable pollution control laws, rules and regulations; general facility operations; and the contents of the various facility ICP and SPCC Plans.

OEHS continues to monitor total oil storage at Shoals Marine Laboratory. Since oil storage reduction of 2015, Shoals Marine Laboratory staff continue to reduce and minimize oil use and storage at the facility. This continued approach of overall reductions in oil storage and use on the Island means a SPCC plan is no longer required for the Shoals Marine Laboratory, as it does not meet the de-minimis threshold planning quantity of 1,320-gallons of above ground petroleum storage, in aggregate containers of greater than 55-gallons each. Current petroleum storage on the Island is now 1,256-gallons. To maintain best practices, OEHS will maintain oil spill response procedures in the Hazardous Materials Emergency Management Plan for Shoals Marine Laboratory and provide annual training to the Shoals Marine Laboratory staff for oil spill prevention and response.

### 8.3 Emergency Planning and Community Right-to-Know

EPCRA, also known as SARA Title III, is a statute designed to improve community access to information about chemical hazards and to facilitate the development of chemical emergency response plans by State and local government. EPCRA requires the establishment of State Emergency Response Committees (SERCs) responsible for coordinating certain emergency response activities and for appointing Local Emergency Planning Committees (LEPCs). The emergency planning requirements of EPCRA are designed to develop state and local government emergency response and preparedness capabilities through better coordination and planning, especially within the local community. The submitted reports are known as Tier II reports and are submitted March 1st annually. The Environmental Compliance Manager within OEHS attends briefings annually held States of New Hampshire and Maine along with the USEPA Region 1 representatives to learn about changes and guidelines for reporting.

UNH maintains threshold planning quantities of extremely hazardous substances and chemicals in quantities greater than 10,000 pounds at the UNH Durham campus, the Shoal's Marine Laboratory on Appledore Island, Maine, and the Landfill Gas Processing Facility in Rochester New Hampshire. OEHS completed and submitted Tier II Reports for facilities to regulatory agencies in 2020.

At the Shoal's Marine Laboratory, for reporting year 2021, OEHS identified sulfuric acid and lead found in batteries utilized in equipment and the solar panel array that required Tier II reporting under this EPCRA program. There were no changes in reporting or quantities from 2020 to 2021 for Shoal's Marine Laboratory.

For reporting year 2021 (submitted in March 2022), OEHS notified the SERC and the LEPC that UNH stores 17 materials, chemicals, and or mixtures that fall above the threshold planning quantity that are required reporting to local and state government. Table 10 below summarizes the Tier II Reporting for the UNH Durham campus from 2017 through 2021. The staggering decrease in quantities of sulfuric acid from 2018 on, is a result of the interpretation of the regulation to not include consumer-use batteries in reporting. The amounts reported in previous years was conservative and included batteries used in standard fleet vehicles across campus

Table 10 EPCRA Tier II Chemicals reported for UNH Durham Campus for Reporting Years 2017 through 2021

Chemical	RY2017	RY2018	RY2019	RY2020	RY2021
Ammonia	2,050	3,398	2,034	2,044	2,039
Chloroform	941	1,038	1,047	973	994
Diesel	25,915	25,915	29,596	35,013	35,013
Formaldehyde	NR	751	436	350**	326
FR3 (transformer fluid)	77,368	108,416	113,125	138,600	138,600
Fuel Oil #2	522,672	590,805	521,944	521,944	521,944
Hydraulic Oil (elevators)	87,336	88,006	88,006	88,006	88,006
Mineral Oil (transformers)	111,600	104,710	88,016	64,284	64,284
PCH-180 (Inorganic Aluminum Salt)	63,088	52,542	52,542	52,542	60,528
Propane	113,867	112,971	112,856	104,011	104,030
R-TEMP (transformer fluid)	54,455	44,664	38,440	42,741	42,741
Sand	100,000	100,000	100,000	100,000	100,000
Salt	607,350	607,350	607,350	607,350	607,350
Sodium Hydroxide	59,195	61,093	166,051	130,683	104,788
Sodium Hypochlorite	24,315	30,808	25,739	25,195	11,133
Sulfuric Acid	2,141	2,853	2,347	2,393	2,293
Sulfuric Acid (Batteries)*	19,420	820	820	820	820

NR Not Reported, did not meet threshold planning criteria
All quantities reported in pounds

Additionally, the UNH EH&SO completed and submitted Tier II report to the Town of Northwood New Hampshire. The filing of Tier II report for this location is a result of isopropyl alcohol and ethanol in hand sanitizer above thereporting threshold. UNH Emergency Management received and is storing roughly 325,000 pounds of hand sanitizer as part of the COVID pandemic response efforts. Officials in the Emergency Management Office will continue to distribute hand sanitizer but does not plan to receive additional quantities until stockpiles are depleted. UNH OEHS is currently assisting Emergency Management with finding ways to successfully recycle or dispose of the excess quantities of materials stored at the EnviroVantage Warehouse in Northwood New Hampshire.

# 9.0 Environmental Monitoring

## 9.1 Air Quality

#### 9.1.1 Title V Air Permit

The NHDES renewed UNH's Title V Air Permit (TV-OP-010) for the campus Central Heating Plant and Co-generation Facility on March 16, 2018. The renewed Title V Air Permit also incorporated the requirements of Temporary Permit and Prevention of Significant Deterioration and Non-Attainment New Source Review permit (TP-B-0531) for the construction and operation of combustion devices associated with the Landfill Gas to Energy facility at Rochester and on the Durham campus, as well as the requirements of Temporary Permit (TP-0161) for the replacement of one of the Central Heating Plant boilers.

The NHDES issued Temporary Permit (TP-0215) for the construction of a biomass boiler system at The Thompson School of Applied Science on March 20, 2018. UNH submitted a request to NHDES on July 29, 2019 for a minor modification to its Title V Operating Permit TV-0010 to include all of the permit terms and conditions related to the Thompson School District Biomass Boiler System (EU26) from Temporary Permit TP-0215. On January 7, 2020, NHDES issued a minor modification to UNH's Title V Operating Permit TV-0010 to include all permit terms and conditions from UNH's Temporary Permit TP-0215.

UNH's current Title V and Temporary permits contain specific conditions that the campus must adhere to, including an annual compliance certification report. UNH filed all periodic reports on a timely basis in 2021.

#### 9.1.2 Air Toxics

An Air Toxics Control Program for the State of New Hampshire was established in 1987 to help protect the health of New Hampshire residents and preserve the environment. This program, together with the US EPA program to control hazardous air pollutant emissions as set forth in Section 112 of the 1990 Clean Air Act Amendments (CAAAs), is designed to reduce the emissions and ambient air impacts of a number of toxic air pollutants likely to be emitted by businesses and industry in the state. Title III of the CAAAs identified 188 hazardous air pollutants (HAPs) that are

likely to have the greatest impact on ambient air quality and human health on a national level. The list of HAPs regulated by EPA is published in Section 112 of the CAAAs.

The NHDES Air Toxics Control Program regulates HAP emissions, as well as over 800 regulated toxic air pollutants (RTAPs), which have a health-based risk to humans. The aim of the regulatory program is to protect public health and the environment by establishing ambient air limits (AALs) and requiring businesses in the state to reduce their emissions of any of the RTAPs, such that they do not impact the downwind air quality at levels that may exceed the established AALs. The list of RTAPs, published in NH Code of Administrative Rules Chapter Env-A 1400 Regulated Toxic Air Pollutants includes: (1) those compounds listed as HAPs by US EPA; (2) those chemical substances for which a threshold limit value has been established by the American Conference of Governmental Industrial Hygienists (ACGIH); and (3) those compounds not otherwise included that are regulated by OSHA. The AALs are reviewed and updated every year as new scientific data on toxicity becomes available.

In July 2020, OEHS updated the University of New Hampshire's air toxics compliance demonstration required under New Hampshire Air Regulation, Chapter Env-A 1400 that was initially prepared in December 2000 and subsequently updated in September 2003, March 2007, February 2009, October 2010, March 2011, April 2013, July 2013, January 2015, February 2016, March 2017, June 2017, March 2018, and July 2019. UNH's compliance demonstration is for the Durham campus, Manchester campus, Law School (Concord) and the Landfill Gas Processing Facility located in Rochester. As part of this updated compliance demonstration, the following activities were carried out:

- Updated UNH Printing Services products and actual usage rates for calendar year 2019 and reviewed safety data sheets (SDS) to identify any new Regulated Toxic Air Pollutants (RTAPs) not covered by the previous update and to assess changes in usage rates.
- Reviewed and updated emissions from the combustion of Landfill Gas (LFG) at the Landfill Gas to Energy (LGTE) facility.
- Reviewed and updated compliance demonstration for cooling tower RTAP emissions.
- Reviewed SDS and determined compliance for degreasing materials used at the Heating Plant and vehicle maintenance shop.
- Reviewed activities at the Paul Creative Arts Center (PCAC) and Morse Hall 145 paint booths.
- Reviewed existing activities identified in UNH's previous compliance demonstration to identify any significant changes to operations and/or equipment.

Upon completion of the review, the results indicate that UNH is in compliance with the ambient air limits listed in Chapter 1400 based on uncontrolled emissions and that a permit for controlling RTAP emissions is not required.

UNH will be updating its air toxics compliance demonstration following issuance of final updates to NHDES's regulation, Chapter Env-A 1400. The regulation is anticipated to be finalized in late January or early February 2022 and UNH will have 90 days from publication to update its compliance demonstration.

# 9.1.3 Refrigerant Management Program

The purpose of UNH's Refrigerant Management Program (RMP) is to:

- Maximize the recycling of ozone depleting substances (ODS) and to minimize the release
  of ODS to the ambient air from the servicing, repairing, maintaining, and disposing of
  refrigeration appliances on its Durham, Manchester, and Concord campuses;
- Utilize certified technicians for the servicing, repairing, maintaining, and disposing of refrigeration appliances on its Durham, Manchester, and Concord campuses;
- Maintain proper records of refrigerant consumption, technician training, and recycling and recovery equipment certification;
- Ensure proper repairs are made for units with significant leak rates; and
- Ensure UNH is in full compliance with Section 608 of the Clean Air Act (CAA) and the requirements of 40 CFR Part 82, Subpart F.

To achieve the stated objectives above, UNH requires all employees and contractors whose job duties require the handling, ordering, repairing, servicing, maintaining, or disposing of refrigerant or refrigeration appliances to review and comply with this written program.

An RMP stakeholder meeting was last held in June 2019, and a subsequent meeting and full RMP update is planned for 2022. UNH has also updated its records management software which should further improve compliance documentation related to Subpart F.

### 9.2 Impacted Soils Management – Urban Fill

OEHS continued support of Facilities and Planning Division with management of Urban fill and soils impacted with hazards materials on campus in 2021.

As discussed in the 2019 Annual report, Urban Fill has been noted in a number of areas across campus. Urban fill commonly consists of granular native soil or fill that contains combustion derived materials such as coal ash, wood ash, slag, and/or cinders, along with anthropogenic materials that may include brick or concrete. Urban fill encountered on campus is likely associated with the former incinerator that was housed on campus where the current heating plant exists.

Initial soil sample analytical results of the urban fill indicated the subsurface material contained low levels of polycyclic aromatic hydrocarbons (PAH's) among other combustion by-products at varying concentrations. In 2018, OEHS developed a Soil Management Plan - Urban Fill Soil (Soil Management Plan) and a Health & Safety Plan (HASP) specific for working in areas where Urban Fill is encountered to address the recommendations for self-management by the NHDES.

The Soil Management Plan includes measures for proper stockpiling of site soils with onsite management (bury with cap) or offsite disposal, management of workers and implementation of engineering controls to minimize migration of material and the protection of the community from contact with soils during construction and after the projects are completed.

In addition, the Soil Management Plan includes information on how to visually identify Urban Fill, provides information on the chemical constituents found in Urban Fill on campus, proper management techniques and site controls to minimize migration of soil and dust, as well as proper procedures when burying the soil on-site. The Urban Fill HASP addresses proper procedures for engineering site controls and personnel protective equipment and procedures to protect human health.

UNH OEHS teamed up with the UNH Planning Geographic Information Systems group to map (in UCAT) areas on campus known or suspected to have *potentially recognized environmental conditions*. Having this information mapped on UCAT provides Facilities Project Managers and Planners with one more tool to help manage and realize potential impacts to construction and utilities projects. A new area has been mapped in UCAT as a potentially recognized environmental condition in 2021. Higher levels of arsenic were found in native soils in the areas of the UNH Durham campus below ground level surrounding the Transportation Garage. The elevated levels of arsenic were discovered during routine excavation end point sampling following the removal of a hydraulic lift system. The New Hampshire Department of Environmental Services agreed the levels are naturally occurring in the area and not a result of human activities at the site (historic or present included). Although the arsenic is naturally occurring in overburden soils, the presence in soils in this area represents a potentially recognized environmental condition.

# **10.0 Laboratory Safety**

# 10.1 Biological Safety

# 10.1.1 Institutional Biosafety Committee Use of Cayuse Hazard Safety Software

OEHS implemented the Cayuse Hazard Safety software for Institutional Biosafety Committee use in January 2021. The new software gave Principal Investigators were given the opportunity to register their work using the new system. Once the Hazard Safety module is on the platform with the other Cayuse modules used by SPA, the full benefit of using a single system and dashboard from award through compliance will be realized.

## 10.1.2 Institutional Biosafety Committee

The Institutional Biosafety Committee consists of thirteen members representing each of the campuses whose work includes recombinant or synthetic nucleic acids and biohazardous materials. In 2021, the Committee went from eleven members to thirteen, adding representation from the Chemistry and Biomedical Engineering departments. The meeting schedule was expanded from quarterly meetings to every other month based on the increase in the number of protocols for review and the challenges with the Cayuse review process.

Table 11: 2021 IBC Membership

Name	Representing	Affiliation
Dana Buckley	Environmental Health and Safety	UNH
Audrey Cline	Municipal: Durham Code Enforcement	Community
John Collins	Molecular, Cellular, and Biomedical Sciences	UNH
Sherine Elsawa	Molecular, Cellular, and Biomedical Sciences	UNH
Andy Glode	Environmental Health and Safety	UNH
Karen Jensen	Sponsored Programs Administration	UNH
Stephen Jones	Natural Resources and the Environment/Jackson Lab	UNH
Linqing Li	Chemical Engineering	UNH
Carol Loring	Private Industry	Community
Kyle MacLea (CHAIR)	UNH Manchester Life Sciences	UNH
Subhash Minocha	Biological Sciences	UNH
Linnea Morley	Animal Resource Office	UNH
Nathan Oldenhuis	Chemistry	UNH

The IBC reviewed and approved 28 protocols and 14 amendments in 2021. There are 76 active protocols across four colleges being overseen by the Committee. The protocols represent research and teaching projects in Biosafety Level 1 (BSL-1) and Biosafety Level 2 (BSL-2) containment (Figure 14, below).

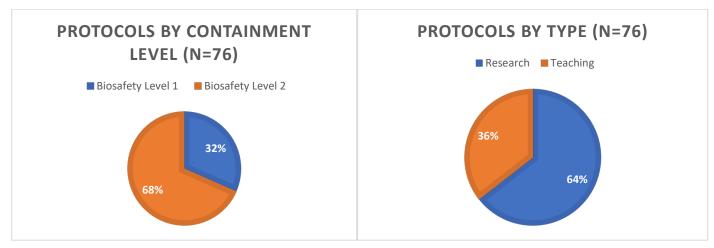


Figure 14: Research and teaching projects in Biosafety Level 1 and Biosafety Level 2 containment

The annual report for the Institutional Biosafety Committee was submitted to the National Institutes of Health on April 30, 2021, and was accepted on June 1, 2021.

Laboratory inspections were completed in support of newly registered protocols; however, as in 2020, due to COVID pandemic protocols, in 2021 inspections for renewal protocols were put on hold in some instances.

Durham and Manchester campuses have a total of one hundred sixty-seven (167) biolabs; seventy-nine (79) are BSL-2 containment labs and sixty-one (61) are BSL-1 containment labs. The Animal Resource Office operates fourteen (14) Animal Biosafety Level 1 (ABSL-1) labs and two (2) Animal Biosafety Level 2 lab. Eleven (11) rooms have miscellaneous BSL-2 activities such as biowaste processing and blood draws. Figure 15 summarizes the biosafety laboratory types across campus.

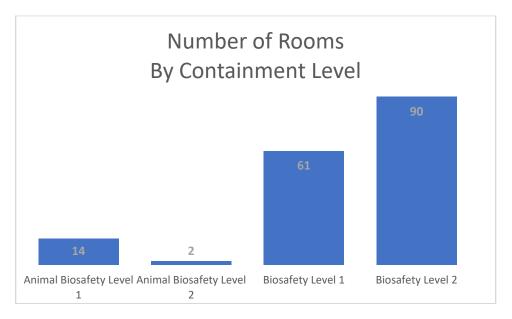


Figure 15: Biosafety lab type distribution

# 10.1.3 Engineering Controls

Biological Safety Cabinets (BSC) are the primary engineering control for containment of infectious aerosols when handling biohazardous materials. Durham and Manchester campuses have Class IIA2 recirculating cabinets, which are appropriate for the research and teaching labs handling biohazardous materials. The campuses operate a total of eighty-eight (88) cabinets for biohazardous work. In 2021, biological safety cabinets were added to the Biotechnology Innovation Center in Manchester and for the second COVID testing lab set up in Gregg Hall.

In addition to Biological Safety Cabinets, the Durham campus has three (3) bioBubble units which are engineering controls specially made for aerosol containment for large pieces of equipment and/or entire rooms. The COVID testing labs have one (1) each for equipment, and the Animal Resource Office has a room sized bioBubble set up for Animal Biosafety Level 2 work.

Equipment is certified annually by the department that owns it and OEHS maintains certification data in UNHCEMS®.

# 10.1.4 Autoclave Treatment of Biohazardous Waste

Biohazardous waste is treated prior to disposal in areas that have access to a steam autoclave. In buildings where a steam autoclave is used for treatment, UNH must comply with the Department of Environmental Services regulation ENV-Sw-904, Infectious Waste. To ensure compliance, OEHS tests and maintains records for ten (10) pre-vacuum steam autoclaves in Rudman Hall, James Hall, Gregg Hall, and Jackson Estuarine Laboratory. None of UNH's autoclaves require a permit from NH DES; however, to meet the regulatory requirements, a total of forty-seven (47) quality tests were performed in 2021.

The NH Veterinary Diagnostic Lab also operates a validated autoclave for biological waste and maintains their own quality records.

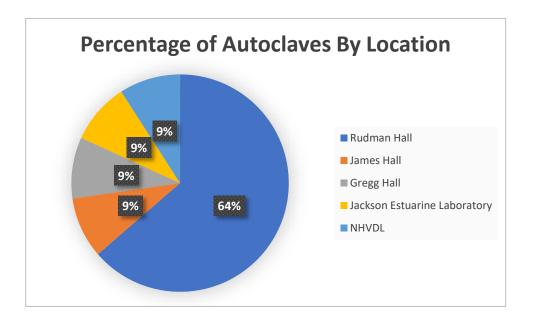


Figure 16: Autoclaves for steam sterilization of biohazardous waste

#### 10.1.5 Institutional Animal Care and Use Committee

Two representatives from OEHS work with the Institutional Animal Care and Use Committee (IACUC) for biological safety and occupational safety issues. The IACUC and Institutional Biosafety Committee overlap in the review of transgenic animal strains and biological vector use in animals. Coordination between both committees is essential for timely review and approval of scientific research.

### 10.1.6 Bloodborne Pathogens Program

The annual review of the campus Exposure Control Plan was completed in December 2021. There were nine (9) blood exposure or sharps injuries reported in 2021. Six (6) people completed the SafetyEngineered Sharps Survey located on UNHCEMS® as part of the Bloodborne Pathogens program, and of the departments tracked by OEHS, fifty-three (53) employees completed the Hepatitis B declination form. Departments such as UNH Police, Athletics, Campus Recreation, Nursing, and Health and Wellness maintain their own training and vaccine records. OEHS maintains records in UNHCEMS® for departments that elect to take online training.

#### 10.1.7 Biosecurity

COLSA continues its biosecurity program for the second floor of Rudman Hall. Principal Investigators are responsible to keep an accurate record of their biological inventory, and OEHS provides technical support as needed for any PI requesting to keep their inventory in UNHCEMS®.

### 10.1.8 Training

Twenty-one (21) biosafety training modules were posted and offered through the online UNHCEMS® system in 2021. These modules represent training in Animal Biosafety Level 1, Animal Biosafety Level 2, Biosafety Level 2, Biosafety Awareness, Bloodborne Pathogens, Sharps Safety, Autoclaving Biohazardous Waste, IBC Member Training, and Principal Investigator Training. Participation in biosafety training by type is shown below in Figure 17.

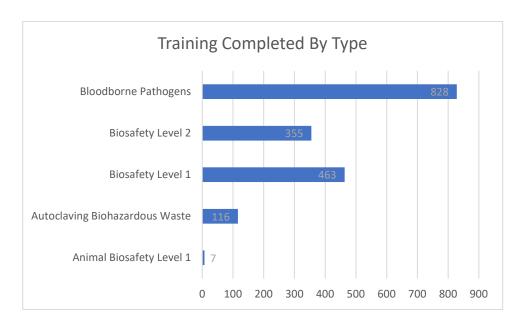


Figure 17: Participation in biosafety training by type of requirement

### 10.2 Chemical and Laboratory Safety

# 10.2.1 Laboratory Safety Inspections

Formal, laboratory safety inspections were not performed due to the continued COVID-19 pandemic as well as staffing shortages within the Environmental Health & Safety Office. However, laboratory safety issues observed during visits, such as chemical inventory deliveries, the annual chemical inventory, and chemical fume hood inspections, are shared with PIs for follow up.

## 10.2.2 Chemical Safety Committee

OEHS continues to administer and support the UNH Chemical Safety Committee (CSC). Representatives from OEHS organize and attend quarterly meetings, compile minutes, draft appointment letters, and fulfill other administrative requirements for the committee. This year, progress regarding COVID-19 mitigation efforts, testing, and other insights were shared. Additional discussions included topics such as the Chemical Hygiene Plan, the UNH Chemical Safety Award, the hazardous waste inspection, laboratory safety updates, laboratory safety renovations, laboratory ventilation, UNHCEMS updates.

# 10.2.3 Regulatory Compliance Services

OEHS continued to monitor and ensure institutional compliance with the US Department of Homeland Security (DHS) Chemical Facility Anti-Terrorism Standards (CFATS). This regulation requires facilities that possess or transfer certain "Chemicals of Interest," to file an in-depth screening report with DHS and comply with certain security requirements. The list of Chemicals of Interest includes over 300 chemicals that could potentially be used for sabotage or the creation of a weapon of mass effect. OEHS uses UNHCEMS® to evaluate the campus inventory for Chemicals of Interest and works with owners to ensure the inventories are accurate.

OEHS administration of the UNHCEMS® Parsons Hall Flammable Liquid Report in 2021 resulted in successful maintenance of compliance obligations. UNHCEMS® automatically sends an alert to OEHS, Principal Investigators, and the DFD when volumes of flammable liquids in laboratories in Parsons Hall exceed fire code storage limits. In addition, UNHCEMS® sends a warning to OEHS and Principal Investigators (PIs) when inventories approach the storage limit, allowing us to evaluate inventories internally before reporting to the fire department is required. OEHS continues to work with PIs to facilitate accurate reporting of flammable liquid inventories and accurate reporting to our emergency responders. This year, three warning threshold alerts were initiated, resulting in PIs reviewing their inventories listed in UNHCEMS®, and correcting records as necessary. No over-limit alerts were initiated this year.

### 10.2.4 Chemical Fume Hood and Laboratory Ventilation Assessments

OEHS continued to perform detailed evaluations of laboratory chemical fume hood operation and performance in 2021 ensuring essential functions. OEHS assesses operation of each UNH's 448 fume hoods annually and whenever hoods are reported to have operational deficiencies. This year, OEHS conducted 1339 fume hood assessments (Figure 18). The chemical fume hood is the primary engineering control protecting workers in research laboratories from hazardous chemical exposures; as a result, OEHS dedicates significant resources to evaluate fume hoods for safe operation.

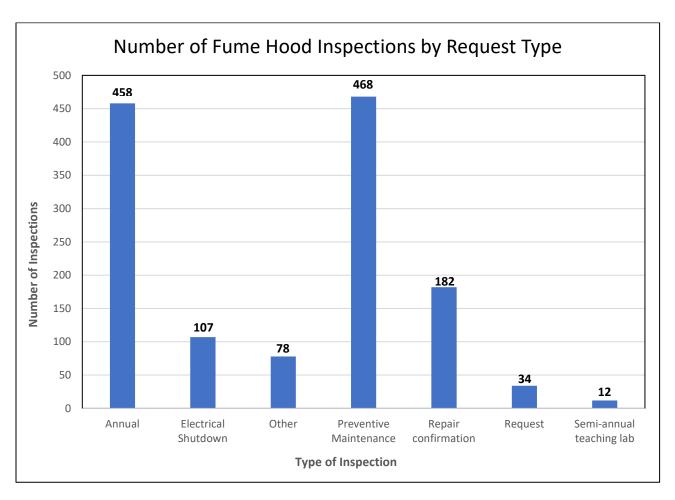


Figure 18: Fume Hood inspection and inspection types performed by OEHS

In 2021, OEHS continued to put significant emphasis on confirming safe operation of chemical fume hoods in teaching laboratories in Parsons Hall and Rudman Hall. Fume hood failures in teaching laboratories can have a significant impact on student safety and course schedule, so OEHS performs a minimum of twice annual assessments of hoods in teaching laboratories in the month before class begins. OEHS worked with the Facilities Maintenance staff to expedite repairs and help ensure classes were not disrupted.

OEHS performed building-wide assessments of fume hood performance following the completion of planned and unplanned shutdowns of building ventilation systems as outlined in the UNH Ventilation Management Plan. OEHS performed building-wide preventative maintenance assessments in Rudman, Spaulding, James, Gregg, Parsons, Demeritt, and Kingsbury.

In addition to evaluation of chemical fume hoods, OEHS also assesses operation of other laboratory ventilation components that may influence worker health and safety. These components include gas cabinets, snorkel exhausts, canopy exhausts, other point source ventilation, valve and actuator operations, dampers, and alarms and control devices including face velocity monitors and flow controllers.

### 10.2.5 Laboratory Design and Renovation

OEHS provides technical input and support for laboratory design and renovation projects including during planning phase, construction, and commissioning. OEHS tested fume hood performance as well as other laboratory exhausts, evaluated face velocity monitor function, reviewed eyewash and deluge showers, flammable cabinets, chemical storage cabinets, safety equipment availability, egress, laboratory heating, ventilation and air conditioning (HVAC) function, and chemical storage. This year, OEHS provided input and support for the following projects:

- Continued to provide extensive input on project expanding and renovating Spaulding Life Sciences building.
- Installed upgraded electrical outlets to support a research laboratory in Rudman Hall.
- Participated in planning meetings and about Barton Hall renovation for LLMP, Soil Diagnostics, and Plant Diagnostics.
- Provided lab design expectations for a forensic analysis laboratory to include chemical and biosafety level 2 work.
- Participated in the Rudman Hall laboratory heating ventilation and air conditioning (HVAC) multi-year project to correct system deficiencies including providing input about project goals and scheduling including weekly project meeting, safety training for contractors, and commissioning testing for renovated fume hoods. Evaluated commissioning testing by outside contractors for conformance with UNH safety expectations.

## 10.2.6 Laboratory Safety Technical Services

OEHS staff provides technical safety services to teaching and research laboratories at UNH and UNH-M. These services include providing chemical safety information, incident investigation, odor investigations, laboratory exhaust evaluation, recommendations for chemical storage and segregation, assessment of PPE, reproductive health assessments, and regulatory compliance services. Examples of select projects and services performed in 2021 include the following:

- Convened group of technical experts to provide support designing a research environmental growth chamber for use with isotopically labeled carbon. Chemical and electrical safety were main considerations in design discussions.
- Assisted Parsons Hall occupants maintaining flammable liquids inventory below regulatory limits.
- Assisted teaching laboratory wit guidance for long-term storage of chemicals as laboratory courses are displaced during a building renovation.

- Provided technical support for management of laboratory ventilation shutdowns in research and teaching facilities.
- Advised researcher on proper use of extension cords in laboratories and strategies to avoid safety and compliance issues.
- Worked with researcher group on development of written protocols and storage practices for 1-hydroxybenzotriazole hydrate.
- Summarized issue of failing chemical fume hood potentiometers at Parsons Hall.
- Collaborated with Olsen Center on fabrication of a bench-top spray booth for a mechanical engineering lab.
- Reviewed proposed CO2 monitor for a research laboratory and determined proposed product was not designed for safety purposes; identified a suitable replacement.
- Assisted with development of storage practices for a pyrophoric chemical in a chemistry research laboratory.
- Coordinated efforts to decommission hazardous gas use from a mass spec laboratory.
   CO, H2, SO2 were removed from the lab, significantly reducing institutional risk.
- Collaborated with the Energy office and an outside engineering firm to evaluate laboratory airflow in a research building.
- Provided support in evaluation of mercuric chloride use in a chemistry undergraduate teaching laboratory.

### 10.2.7 Laboratory Safety Training

OEHS provides laboratory safety training for the campus community. Below is a list of trainings provided and number of individuals who completed the training (Table 12).

Table 12 Laboratory Safety Training Provided in 2021			
Training Title and Description	2021 attendees		
Laboratory and Chemical Safety Training: fundamentals of chemical safety, hazard communication, controlling hazards, emergency response procedures.	223		
Laboratory Safety Awareness for Introductory Level Laboratory Sciences	1882		
Review of Laboratory and Chemical Safety: live review session for those who have already completed Laboratory and Chemical Safety Training	12		
Cryogenic Liquid Safety Training: required for those using liquid cryogens	49		

### 11.0 Hazardous Materials

### 11.1 Chemical Transfer Station

OEHS continued to operate the Chemical Transfer Station (CTS) in 2021. Chemical orders for all research chemicals, except those for the Chemistry Department, are received at the CTS.

OEHS staff receive chemical deliveries at the CTS, barcode the chemical containers, and collect information required for the chemical inventory. Packages are then re-sealed and delivered directly to research laboratories on the same day the package is received.

Annual trends for 2021 (Figure 19) showed a continued increase in containers from 2020. The sum of containers added to the inventory in 2021 includes routine new containers, chemicals ordered by the COVID lab, chemical containers found in labs during inventory verification without barcodes, and approximately eight hundred (800) 2020 containers which were labeled with misprinted barcodes and were replaced with 2021 barcodes during the inventory verification.

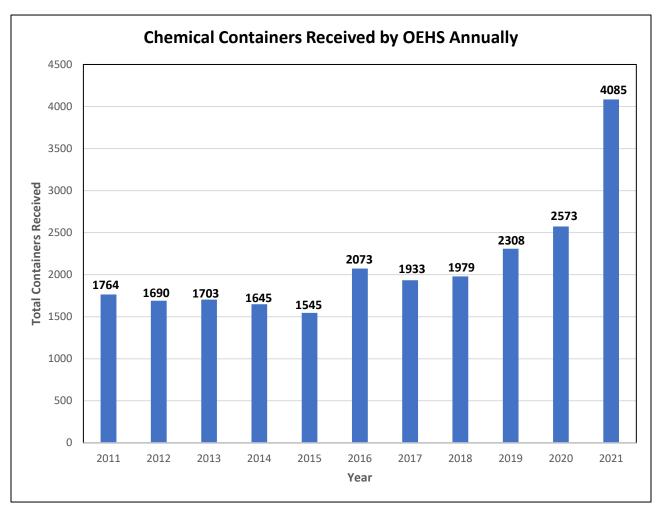


Figure 19: Chemical containers received, processed and delivered by the OEHS Chemical Transfer Station per year

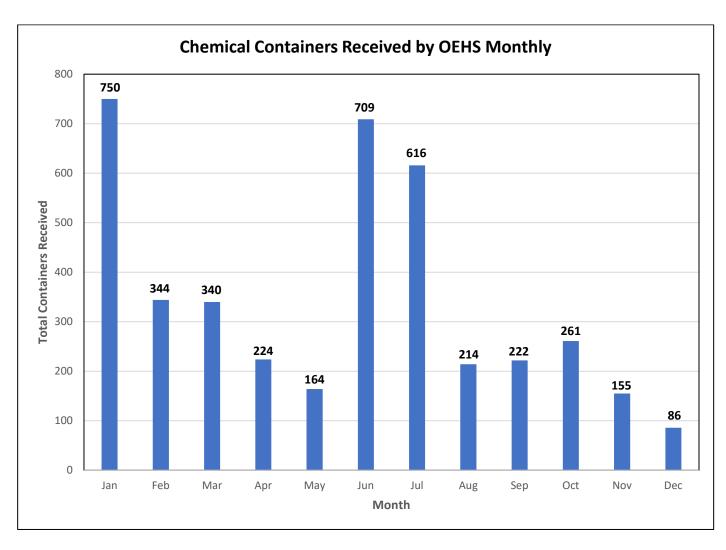


Figure 20: Monthly breakdown of chemical containers processed by OEHS throughout 2021

### 11.2 Chemical Inventory Verification Program

A chemical inventory audit was performed from May 17<sup>th</sup> through July 10<sup>th</sup>, 2021. This operation is essential in verifying the numbers of chemicals on site and ensuring UNH stays within permitted limits for occupancy agreements. During the course of 37 days, the inventory team scanned over 35,000 chemical containers in 390 laboratories across the UNH Manchester and UNH Durham campuses. An additional 1,744 containers were barcoded while in the field and approximately 800 containers marked empty.

# 11.3 UNHCEMS® Inventory

Data collection and compliance reporting for OEHS relies heavily on UNHCEMS®. Indeed, the entire University Community uses UNHCEMS®. Approximately 21,287 active users (as compared to 18,874 active users from 2020) accounting for faculty, staff, students, visiting researchers, and contractors, among others that have access to the UNHCEMS® software program online. The dramatic continued increase in users is directly related to UNHCEMS® as the resource for tracking COVID testing compliance through the Wildcat Pass.

As mentioned in other sections of this Annual Report, UNHCEMS® is widely used by the University to track other programs such as training, radiological materials, laboratory equipment, and environmental programs. OEHS assists the UNH community with gaining access to resources provided by UNHCEMS®, including training and technical support and acting as a liaison between the software development team in research computing center and campus stakeholders.

Additional UNHCEMS® statistics for the calendar year of 2021, relative to the UNH Durham campus chemical inventory and hazard communications include:

• 46,078 active containers on campus

• 68,112 SDSs in library

• 7,174 containers marked empty

• 654 active Door Signs

OEHS continues to work with researchers and staff to reduce the amount of legacy chemicals across campus. UNHCEMS® is instrumental in identifying legacy chemicals and keeping track of laboratory moves. Data from UNHCEMS® is exported to the Laboratory Safety Manager for review once a researcher or faculty has retired or has been assigned new laboratory space to not only review the inventory for disposal but also to identify chemicals that may be valuable to other researchers and have them redistributed. All chemical waste disposal is tracked in UNHCEMS® providing readily exportable datasets for the Hazardous Waste Manager in OEHS.

# 11.4 Hazardous Materials Shipping

OEHS continued efforts to maintain compliance with hazardous material shipping regulations by offering guidance, training, on-site review, and reference material to the UNH community. OEHS provided professional guidance and training to 19 UNH research groups in 2021. This included providing guidance for domestic and international research material shipments.

OEHS continued a partnership with the Thompson School Veterinary Technician Program to offer shipping certification training to students. As students enter their profession, they will likely have responsibilities to ship infectious and potentially infectious samples. Providing the necessary training to perform these tasks will help students market themselves to prospective employers. Twenty (20) students in the Veterinary Technician program attended this training which was offered as part of their coursework.

OEHS offers shipment of dry ice online training ice online. In 2021, eight (8) researchers passed the training requirements to receive a certificate ship dry ice by air.

Resources created by UNH OEHS for hazardous material shipping are used extensively nation-wide. Several UNH hazardous material shipping documents are widely recognized as standard reference material and are used by many other institutions. OEHS continued to create and update hazardous material shipping reference documents for the UNH research community in 2021, including updating training documents for shipment of infectious substances and shipment of methanol preserved specimens and dry ice.

### 11.5 Hazardous Waste Management

OEHS provides hazardous waste management support to faculty, staff, and students at the Durham campus as well as the Manchester campus, UNH School of Law, Jackson Estuarine Laboratory, Coastal Marine Laboratory, Shoals Marine Laboratory, John Olson Advanced Manufacturing Center, and the UNH Automotive Garage. We manage US EPA, State of New Hampshire, and State of Maine regulated waste materials generated throughout the year as a byproduct of research, teaching, and facilities operations. In addition, the staff have been involved in several projects and initiatives to limit the university's environmental liability by assuring proper transportation and disposal of hazardous materials and wastes and by reducing the quantity and toxicity of hazardous waste streams generated.

This year OEHS hazardous waste staff were involved in the following special projects:

- On June 23 24, the New Hampshire Department of Environmental Services (NHDES), Waste Management division, conducted a periodic regulatory inspection of the Durham campus to determine the university's level of compliance with the State of New Hampshire Hazardous Waste Rules (Rules). The Rules codify the hazardous waste regulations required by state law for New Hampshire's hazardous waste generators. OEHS has not yet received a final inspection report from NHDES, however, closing conference comments immediately following the inspection were generally excellent.
- Management of biohazardous waste and chemical waste from the university COVID-19 test lab.
- Managed the removal and disposal of bulk hazardous materials from the Arthur Rollins
  Treatment Plant which was constructed in 1935 and supplied potable water to UNH and the
  Town of Durham. The Arthur Rollins Plant was decommissioned after completion of a new
  water treatment plant which became operational in March of 2020.
- Managed the disposal of chemical contaminated materials and remediation wastes generated by UNH Facilities capital construction and renovation projects.
- Provided biohazardous waste management support for large scale university COVID-19 vaccine inoculation and rapid test clinics held at the Whittemore Center Arena.

# 11.5.1 Inventory Reductions

OEHS performed hazardous material inventory reductions throughout the University to increase safety and reduce liability in 2021, including but not limited to:

Disposal of legacy and surplus chemical reagents from Spaulding (158), Rudman (257),
Parsons (60), Arthur Rollins Water Treatment Plant (57), Morse (22), Kingsbury (122). 676
hazardous material containers were removed and disposed of. This represents the
following chemical inventory reductions by building: Spaulding (11%), Rudman (3.4%),
Parsons (0.3%), Old Water Treatment Plant (100%), Morse (1.2%), Kingsbury (5.2%).

# 11.5.2 Summary of Hazardous and Universal Wastes Generated

As a result of various campus activities, the following statistics represent chemical and biological waste generation and disposal for the University in 2021.

Total Chemical and Biohazardous Waste generated:

• Chemical Waste: 13,008 kilograms

• Biohazardous Waste: 765 cubic feet

Quantities of hazardous chemical waste generated across campus departments and buildings are displayed in Figures 21 and 22 below. Overall, approximately ninety percent of the waste is generated through research and teaching activity, with operation and support functions contributing theremaining ten percent.

In 2021, the Chemistry Department (Parsons Hall) continued to be UNH's largest generator of hazardous waste. Chemistry will continue to lead hazardous waste generation indefinitely due to the nature of the science. Teaching core curriculum chemistry courses for approximately fourteen hundred undergraduate science and engineering students each semester accounted for forty two percent (42%) of the Chemistry department's waste generation.

The hazardous waste produced by Cooperative Extension (Lakes Lay Monitoring Laboratory) in Spaulding Hall and the Department of Natural Resources, and the Environment in James Hall is generated primarily by the research performed by two laboratories. These laboratories produced 88 percent and 84 percent of the hazardous waste generated at Spaulding and James Hall, respectively.

Annual waste production at the Co-Gen/Central Heating Plant is significant and is variable year to year due to periodic maintenance requirements thoughroutine waste streams such as usedoils and contaminated wipers have been static.

The New Hampshire Veterinary Diagnostic Laboratory (NHVDL) generates histopathology chemical wastes related to veterinary laboratory services provided to New England region veterinarians, various NH state agencies, and state and local law enforcement agencies.

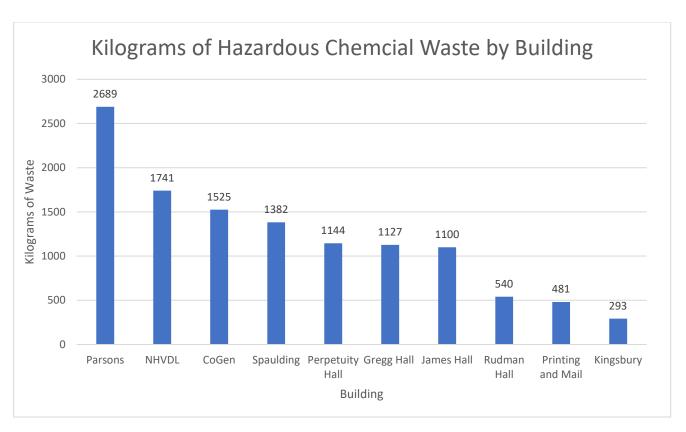


Figure 21: Kilograms of Hazardous Chemical Waste disposed in 2021, by Building

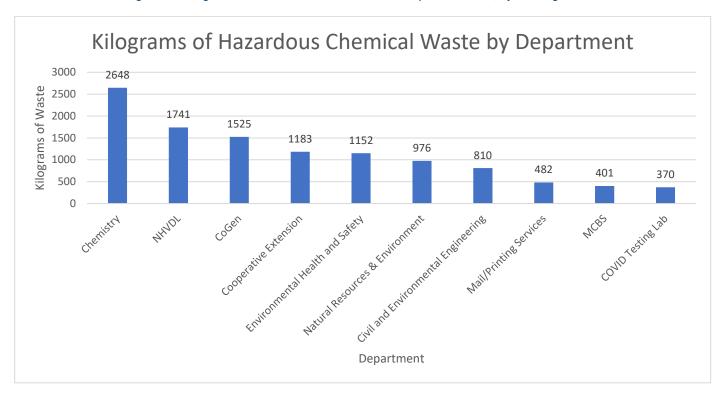


Figure 22: Kilograms of Hazardous Chemical Waste Disposed in 2021, by Department

#### 11.5.3 Universal Waste

Universal Waste generation in 2021 saw a return to historic trends for fluorescent lamp and ballast recycling across the board. Fourteen circline lamps received for recycling last year indicating that this waste stream is negligible, and the graph has been deleted. HID lamps received for recycling dropped to a 10 year low of 186 showing the continuing trend of phasing out of this type of lamp. Lead acid battery recycling continues to see recycling rates well above the historical trend with three tons recycled this year versus a historical trend of about 1.5 tons. This is likely due to the regular replacement of batteries from back-up systems throughout the university. Figure 29 shows figures for the disposal of alkaline and other types of batteries from the University. Last year over 1000 pounds of batteries were sent for recycling.

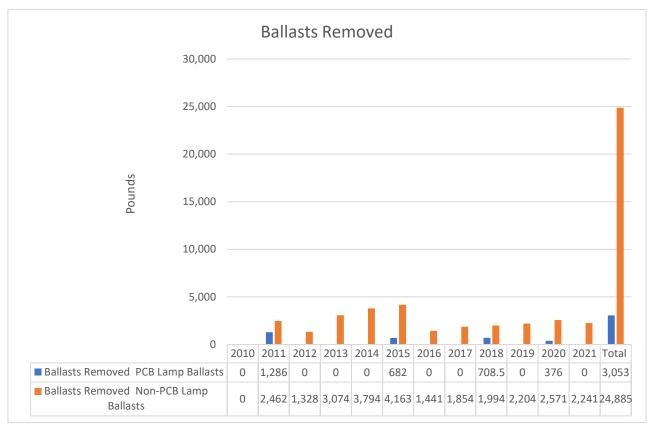


Figure 23: Ballasts Removed from Campus from 2011 through 2021

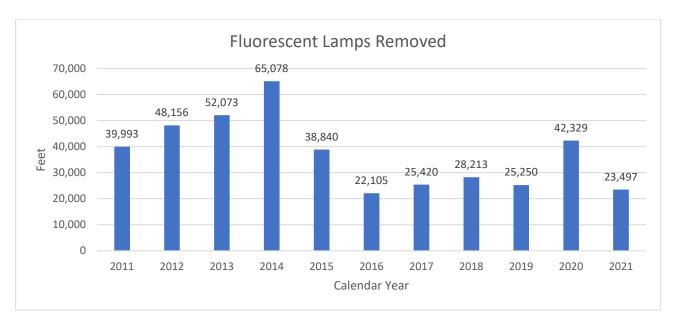


Figure 24: Fluorescent Lamps Disposed by OEHS from 2011 through 2021

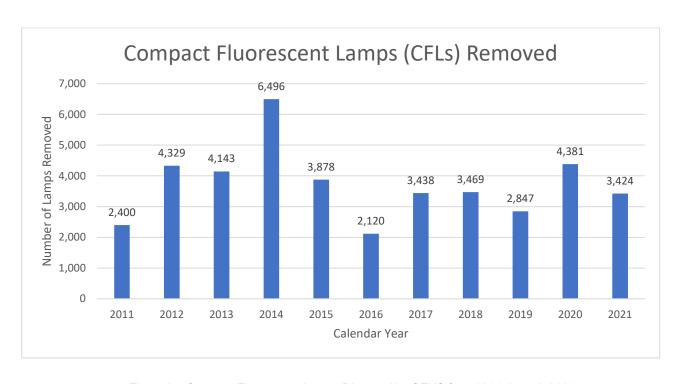


Figure 25: Compact Fluorescent Lamps Disposed by OEHS from 2011 through 2021

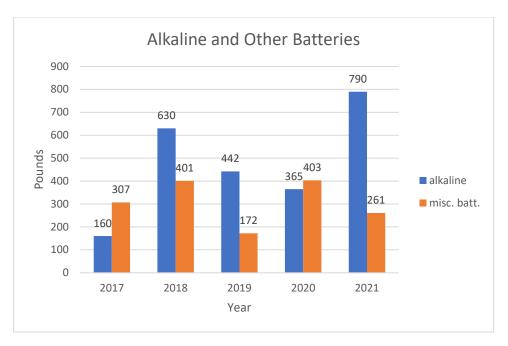


Figure 26: Alkaline and other batteries recycled by OEHS from 2017 through 2021

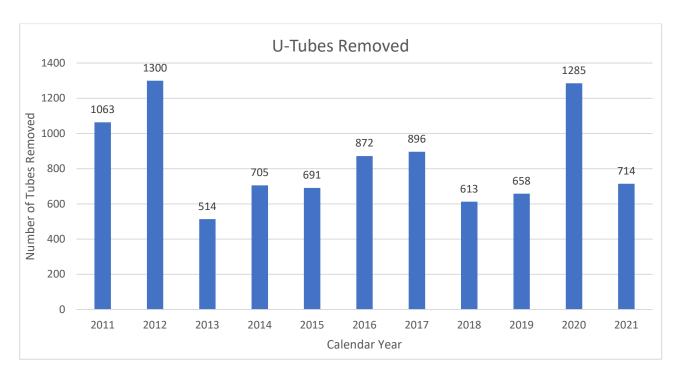


Figure 27: U-Tube lighting disposed of by OEHS from 2011 through 2021

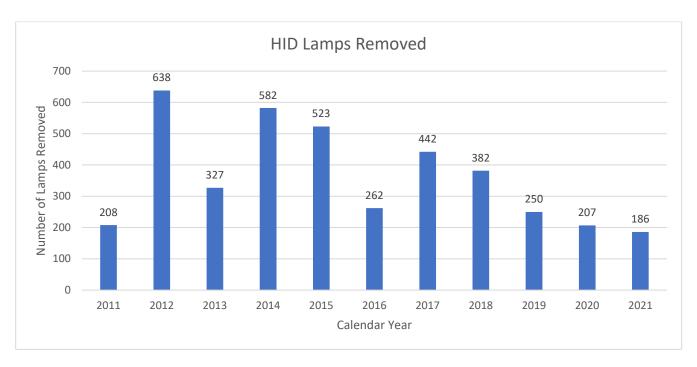


Figure 28: Number of HID Lamps Disposed by OEHS from 2011 through 2021

Figure 29 summarizes the pounds of lead-acid batteries disposed of between 2011 and 2021. Since 2012 the quantity of lead-acid batteries has been reasonably consistent averaging 3488 pounds per year plus or minus 500 pounds. In 2019 a significant increase was seen in waste lead-acid battery generation due to the University purchasing two solar power arrays and the replacement of lighting units to use LED technology. 2021 saw a generation rate consistent with the recent trend plus a COVID-19 "bump" in generation like that with the fluorescent lamps.

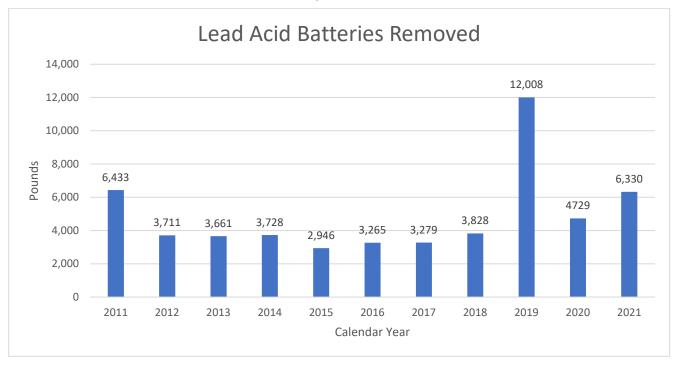


Figure 29: Lead Acid Batteries Disposed by OEHS from 2011 through 2021

Routine maintenance of emergency lighting is the primary source of lead-acid batteries being recycled by the OEHS.

As existing emergency lighting fixtures are replaced with modern, efficient light emitting diode (LED) type designs we may see a reduction in lead-acid battery generation and an increase in other regulated battery types such as nickel-cadmium or lithium.

Figure 30 summarizes the Infectious Waste Disposal. In 2021 the amount of regulated biological waste generated by research and teaching activity returned to historic trends at 170 boxes. This was due to the COVID-19 Testing Lab being managed separately during the year.

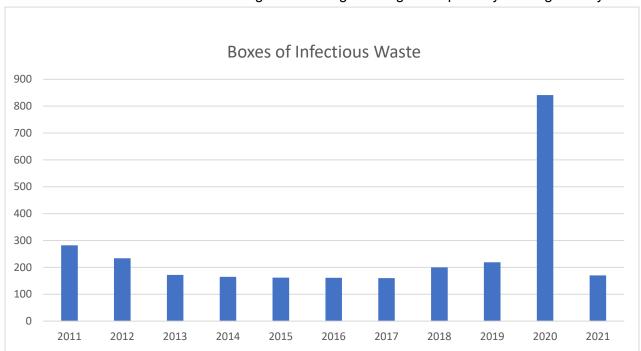


Figure 30: Boxes of Infectious Waste Disposed of by OEHS from 2009 through 2021

# 12.0 Radiation, Laser and Magnet Safety

# 12.1 Radiation Safety

### 12.1.1 Program Information

UNH possesses a Type-A Broad Scope License issued by the New Hampshire Department of Health and Human Services, Radiological Health Section, to use and store radioactive materials. OEHS manages the associated Radiation Protection Program and ensures compliance with license conditions and applicable rules and regulations. OEHS periodically reviews and updates the Radiation Protection Program and the Radiation Safety Users Guide. OEHS distributes and reviews new and renewal applications for the use of radioactive material by University personnel and issues permits to Authorized Users as granted by the UNH Radiation Safety Committee (RSC).

### 12.1.2 Training

State regulations require Radiation Worker training for incoming employees as well as Radiation Worker Refresher training once per year. Radiation Worker training prepares workers to use radioactive material and is a 3-hour training that includes on-line through instructor-led elements. Six students, staff, and faculty completed Radiation Worker training, and 36 students, staff and faculty participated in Radiation Worker Refresher training on-line. Live presentations and on-line trainings are revised annually by the Radiation Safety Officer (RSO). Radiation Worker Refresher is updated annually as needed, to reflect compliance with state regulations.

For those students, staff, or contractors that need to access radioactive laboratories, but do not use radioactive material, Radiation Awareness training is conducted.

Training for UNH contractors is conducted via an instructor-led course. In addition to the basics of radiation awareness this training includes elements of laser, magnet, x-ray, laboratory, and biological safety.

### 12.1.3 Radiation Protection Program Maintenance

OEHS maintains the Radiation Protection Program (RPP) manual and the Radiation Safety Users Guide (RSUG). These documents are revised at least every two years as a best management practice. The RPP was updated with a new OEHS organization chart and a new delegation of authority letter from President Dean. The RSUG had minor edits and formatting corrected.

# 12.1.4 Audit and Regulatory ReviewThird Party Audit

State regulations require an annual review of the radiation safety program. UNH contracts with Clym Environmental Services, LLC each year to review the radiation safety program at UNH. The annual review includes a site walk of laboratories, wipe tests for possible contamination, and a document review. The 2021 audit suggested minor improvements to radiation safety program and these suggestions are being implemented.

### 12.1.5 Radiation Safety Monitoring Instruments

OEHS tracks the annual calibration of survey instruments, such as Geiger counters, and Sodium lodide detectors. Gas Chromatographs (GC) and Liquid Scintillation Counters (LSC) are inventoried twice per year for the sealed sources internal to the machine. OEHS has eight survey instruments and one LSC. Permitted laboratories have three survey instruments, seven GCs, and six LSCs.

Table 13 Radiation Safety Monitoring Instruments Maintained by OEHS					
Model Number	Instrument Type	Manufacturer	Calibration		
RSO-5		Bicron	Annual		
ESP	Nal Meter	Eberline	Annual		
ASP2E	Neutron Monitor	Eberline	Annual		
ASP2E		Eberline	Annual		
Gr-130		Exploranium	Annual		
3	GM Counter	Ludlum	Annual		
3	GM Counter	Ludlum	Annual		
3-241R		Ludllum	Annual		
3	GM Counter	Ludlum	Annual		
14C-084R	GM Counter	Ludlum	Annual		
3	GM Counter	Ludlum	Annual		
3	GM Counter	Ludlum	Annual		

# 12.1.6 Occupational and Public Doses-Dosimetry Program

OEHS manages a dosimetry program to track doses from external radiation for applicable faculty, staff, and students. State regulations dictate individual exposure limits in one year. OEHS tracks these doses each quarter to assure compliance with these regulations. This program switched from a bi-monthly to quarterly exchange program in 2019. OEHS interprets results of dose reports for Authorized Users and Radiation Workers, Health Services staff, and Veterinary Technology staff and students. OEHS also tracks area monitors in Space Science, VeterinaryTechnology and the OEHS radioactive waste room. Area monitors are dosimeters placed in hallways adjacent to radioactive materials work or storage locations to track the potential dose to non-radiation workers and the general public. OEHS issued annual occupational dose history reports to Radiation Workers, which documents doses for the previous year. OEHS processed 12 termination dose history reports for individuals who have ceased using source of radiation at UNH. Typical types of dosimetry badges and rings are shown in Figure 31, below



Figure 31:Typical Dosimeter

For Veterinary Technology there have been 17 dosimeters exchanged every three months. Health Services had 4 dosimeters exchanged every three months and Authorized User Radioactive Permits had 23 dosimeters exchanged every three months.

### 12.1.7 Surveys and Monitoring

Surveys were conducted quarterly in 2021. The RSO, or designee, performed surveys in laboratories three times and Clym Environmental performed surveys once per year as a third-party audit. Surveys include monitoring with a Geiger counter and conducting wipe tests with a filterpaper to identify surface contamination and a review of lab records. No items of non-compliance were found during these routine surveys.

### 12.1.8 Leak Test Procedures

Sealed sources are solid forms of radioactive materials that do not normally pose a threat of contamination. In rare instances, these sources may leak radioactive contamination, therefore leak tests are performed on sealed sources at a frequency prescribed by the State of New Hampshire, Radiological Health Section. There are 125 active sealed sources on campus and all sealed sources are inventoried twice per year.

OEHS completed of 74 leak test evaluations across the UNH campus. The RSO, or designee, performed forty-eight (48) three-month leak tests on alpha sources.

Semi-annual leak tests are performed on beta, gamma, and neutron sources as required by the State of New Hampshire, Radiological Health Section. Twenty-six bi-annual leak tests were performed by the RSO, or designee for OEHS, in 2021.

# 12.1.9 Waste Management

OEHS manages the pick-up, storage, and disposal of radioactive waste including Dry Active Waste, (DAW), Liquid Scintillation Vials, and other radioactive materials as necessary.

Liquid scintillation vial waste is deregulated and is stored until a 55-gallon drum is full and shipped out for incineration. In 2021, OEHS picked up approximately 23-gallons of liquid scintillation vial waste.

Dry active waste is contaminated solid material such as gloves, absorbent pads, and paper towels generated in laboratory activities using long-lived radioisotopes. OEHS picked up approximately 20-gallons of DAW in 2021. DAW is stored on site for disposal on an approximate three-year cycle. The next estimated DAW waste disposal year is 2022.

OEHS also manages disposal of naturally occurring compounds such as uranyl acetate, thorium nitrate, and uranium. These are generally licensed materials when purchased and need to be disposed of as radioactive waste when no longer needed. OEHS picks up these materials from principal investigators and stores the material for subsequent shipment for disposal as radioactive or mixed waste.

#### 12.1.11 Waste Minimization

OEHS maintains a waste minimization program by instructing researchers to limit long-lived radionuclides that need to be shipped for burial. Waste minimization techniques are taught to Radiation Workers by the RSO, such as excising small pieces of contaminated bench pads rather than discarding the whole pad after each experiment.

### 12.1.12 Radon Management Program

Radon is a radioactive gas emitted from rock or soil, which may be hazardous to breathe into the body. OEHS maintains a program to monitor for radon in any new building, rental property, or any large-scale construction project to a building. Charcoal vials (Figure 32) placed in the buildingfor the weekend are then sealed and sent to an outside laboratory for analysis.

As an example, in 2020 radon testing was requested for a residential property located at Mast Road in Durham, New Hampshire. The property was set-up as a resource for COVID-19 pandemic quarantine and isolation response.



Figure 32: Radon sampling media

### 12.2 Magnet Safety

#### 12.2.1 Program Information

UNH teaching and research programs utilize instruments that generate large, static magnetic fields such as Nuclear Magnetic Resonance (NMR) spectrometers and Superconducting Magnets (SM). In response to the hazards posed by such instruments, UNH has implemented a Magnet Safety Program (MSP) as a best practice. The program elements include a safety manual, training, standard operating procedures (SOPs), and area audits. The MSP falls under the purview of the Radiation Safety Committee.

### 12.2.2 Training

A NMR training program was developed between OEHS and the University Instrumentation Center (UIC). Students, staff, and faculty take an on-line course through UNHCEMS® for part 1 of their training. The UIC then trains the individual on the SOP and issues a key to the NMR room. Refresher training is tracked by the RSO each September. Thirty-three students, staff, and faculty were trained in Magnet Safety in 2021.

# 12.2.3 Registration and Instrumentation

Magnet registration is required by the MSP. For ease of access for magnet owners a module was created in UNHCEMS® to register magnets with OEHS. There are four active superconducting magnets or NMR units on campus, as summarized in Table 14. Figure 33 shows a typical superconducting magnet in use at UNH.



Figure 33: Superconducting magnet located at UNH Durham

Table 14 Magnet Instrument Inventory 2021						
Model Type	Strength Tesla	Vertical Distance to 5g line	Horizontal Distance to 5g line	Status	Location	
Oxford AS400/54 NMR	9.395	1.49	0.88	Active	Parson sHall W124	
Oxford AS500/51 NMR	11.744	1.84	1.31	Active	Parson sHall W124	
American Magnetics NMR	5, 7 max	92-inches	72-inches	Active	Demerit tHall 103	
High Resolution NMR	7.05	1.7 m	2.3 m	Active	Demerit tHall 103	

# 12.2.4 Surveys and Audits

Visual surveys are conducted twice per year in the two superconducting magnet laboratories. Surveys are performed by the RSO or designee. The State of New Hampshire does not inspect superconducting magnets used for research. Survey inspection items include, proper area postings, updated operating procedures and adequate designation of the the 5-gauss line. Magnetic fields are measured in units of magnetic induction, such as gauss. The 5-gauss line designates how close someone with a metallic implant such as a pacemaker can get to the magnet without any harm.

### 12.2.5 Program Maintenance

The MSP is updated every two years by the RSO and reviewed by the Radiation Safety Committee. The on-line training program through UNHCEMS® is updated once per year in preparation for refresher training. SOPs are updated by the magnet laboratories annually.

# 12.3 X-Ray Safety

## 12.3.1 Program information

UNH is committed to maintaining the highest quality X-Ray Protection Program (XPP). Likewise, UNHcommits to full and complete compliance with all relevant requirements in the State of New Hampshire Rules for the control of radiation. The XPP is designed to control operations conducted at UNH Research and Educational Facilities which may result in the potential exposure of UNH personnel, members of the general public, and/or the environment to X-Ray Radiation.

The University of New Hampshire's commitment to the XPP is based on the fundamental principle that levels of radiation to be used, and exposures to all sources of ionizing radiation, are to be maintained As Low As Reasonably Achievable (ALARA).

The XPP is administered by the UNH RSO and supported by OEHS and the UNH Radiation Safety Committee. UNH has X-Ray diffraction machines and electron microscopes, as well as diagnostic machines for the Veterinary Technology program.

### 12.3.2 Training

All students, staff, and faculty who use X-Ray producing machines take X-Ray Safety training on-line through UNHCEMS<sup>®</sup>. Refresher training is offered once per year based on state regulatory requirements. Thirty-five people completed X-Ray Safety or X-Ray Refresher training in 2021.

#### 12.3.3 Registration and Instrumentation

State registration and payment is required to operate an X-Ray producing machine on campus. All X-Ray producing machines are registered each summer and the certificate of registration is posted in the laboratories. An instrumentation inventory is maintained by the RSO and summarized in Table 15 below.

Table 15 X-Ray Machines Registered at UNH in 2020			
Model	Room or Area	Location	Туре
Shimazdu	XRD-6100	Parsons N123	Diffractometer
Bruker-Axs	GADDS	Parsons N123	Diffractometer
Siemens- Kristalloflex	D-5000	James 284	Diffractometer
Kratos Analytical	Supra	Parsons W118	X-Ray Fluorescence
ZEISS	Incidental to use	Parsons NB17AC	Electron Microscope
Tescan	Lyra 3 GMU	Parsons NB17AD	Electron Microscope
Teltron	Tabletop Model	Demeritt 317	Diffractometer (X-Ray)
Ultra	EPX-F1200	Barton 132	Diagnostic
Sedecal	R108	Barton 119C	Diagnostic: General Purpose, Animal
Sirona	Heliodent Plus	Barton 119E/F	Diagnostic: dental, ani- mal
All Pro Imaging	Provectav	Barton 205	Demo only: dental, ani-mal

#### 12.3.4 Surveys

X-Ray laboratories were surveyed twice in 2021. The RSO, or designee, completes these surveys, totaling twenty-two (22) X-Ray surveys in 2021. For cabinet machines, surveys include testing the interlocks. Tests are completed for leakage of radiation for all X-Ray producing machines and postings are verified.

#### 12.3.5 Postings

Signage is posted per State of New Hampshire Regulations in X-Ray laboratories including the Notice to Employees (Form RHS-5), which provides workers contact information to notify the state of unsafe conditions, the Certificate of Registration of the machine, and the Standard Operation Procedure to properly usethe machine.

#### 12.3.6 Audits and Regulatory Reviews

Clym Environmental surveys the X-Ray laboratories as part of the annual third-party audit of the program. No items of non-compliance were found in the x-ray program in 2021. The State of New Hampshire, Radiological Health Section audits the UNH XPP once every three-five years. UNH was last audited by the State in 2015.

#### 12.3.7 Program Maintenance

The XPP is revised every two years. Dosimetry records are analyzed every three months for Veterinary Technology faculty and students. Additional surveys are conducted if machines are repaired.

#### 12.4 Laser Safety

#### 12.4.1 Program information

The Laser Safety Program (LSP) presents guidelines to protect UNH employees and students from the hazards associated with lasers and laser system operations. The intent of this program is to ensure the safe use of lasers through engineering and administrative controls. This objective shall be accomplished by identifying potential hazards, providing recommendations for hazard control, and training laser operators and incidental personnel. The LSP manual outlines the laser safety recommendations for UNH and is based on the American National Standard for the Safe Use of Lasers, or American National Standards Institute (ANSI) standard guidelines. There are currently no state regulations that pertain to laser safety, although the Radiological Health Section would like to regulate lasers in the future. A typical laser set up with posted SOP at UNH is shown in Figure 34.

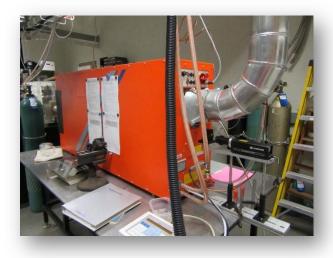


Figure 34: Picture of a laser device at UNH

#### 12.4.2 Training

On-line training through UNHCEMS® is offered for Laser Operators. Laser Operator training includes hazard identification, proper signage, use of protective eyewear, laser registration requirements, and SOP requirements. All laser trainings are updated annually. In 2021, OEHS Laser Operator training was completed by six students, staff, and faculty. Live and on-line Laser Awareness training is offered for those that need to enter laser laboratories, but do not use lasers. Twenty-two students, staff, and contractors completed Laser Awareness training in 2021.

#### 12.4.3 Registration and Inventory

All active and inactive lasers are registered with OEHS. OEHS has an inventory of 42 class 3B and class 4 lasers, of which 7 are in active use. Figure 33 represents the number of lasers in each building on campus. The Laser program has been determined by both Clym Environmentaland the Radiation Safety Officer as an area that needs more attention. This program will undergo a full internal audit in the future.

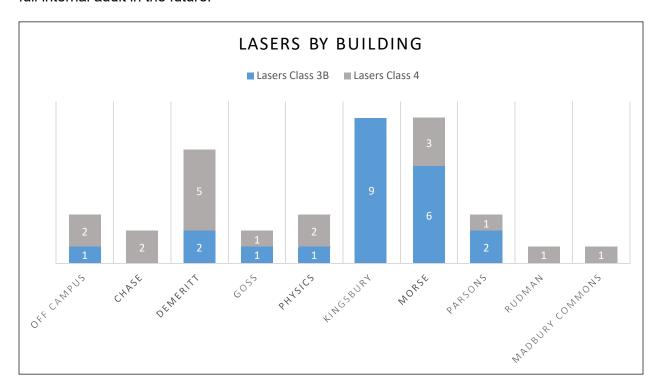


Figure 35: Total Lasers on Campus by Building (includes Active Lasers and Lasers in storage)

#### 12.4.4 Standard Operating Procedures

Written SOPs are required for both the regular use and alignment of class 3B and 4 lasers. SOPs are updated by the Authorized User, approved by the Laser Safety Officer, and signed by the students and faculty that will be using the laser. The SOP should be referenced each time the laser is used.

Some examples of the safety precautions in a laser SOP include: validation of required training; removal of all reflective jewelry, watches, and belt buckles; use of laser-in-use lighted signs; securing all laser safety curtains or barriers; and proper use of required personal protective equipment.

#### 12.4.5 Personal Protective Equipment

Laser safety eyewear and laboratory coats are examples of PPE. Laser safety eyewear has an optical density and wavelength specific to the laser. The calculated wavelength and optical density are described in the SOP for Authorized Users. Laboratory coats are recommended withultraviolet lasers to protect the skin. Flame retardant laboratory coats are recommended for Class4 lasers.

#### 12.4.6 Surveys

Laser Safety surveys are conducted twice per year in all laser laboratories, once by the LSO and once by a third party. Survey inspection items include: proper registration; current training; appropriate PPE use; SOPs posted; Appropriate curtains and/or barriers; and accident / incident reporting and documentation.

Significant findings are reviewed by the Radiation Safety Committee.

#### 12.4.7 Audits

Third party audits are performed every fourth quarter by Clym Environmental. Similar to laser surveys, inspection items are reviewed and an interview is completed with the Authorized User. Discrepancies identified during any audits are immediately addressed.

#### 12.4.8 Program Maintenance

The LSP is reviewed and approved by the Radiation Safety Committee every two years as a best practice. The LSP was updated in 2020 with a new OEHS organization chart, a new delegation of authority letter from the president, and updated formatting.

#### 13.0 UNH at Manchester

#### 13.1 Safety Committee

The charge of the Environmental Health and Safety Committee is to assure a safe work environment for faculty, staff and students and visitors through the creation and maintenance of effective health and safety programs. It is the responsibility of the Committee to establish appropriate health and safety policies, programs, and procedures in accordance with federal regulations and guidelines that cover workplace safety and emergency preparedness. The UNH Manchester Emergency Health and Safety Committee (EHSC) met in 2021 to address pertinent

health, safety, and emergency matters for the UNH Manchester campus. A few of the accomplishments of the group are listed below:

- COVID-19 surveillance testing was performed for all students, staff, and faculty accessing UNHM Facilities
- COVID-19 mitigation cleaning protocols were continued throughout 2021

#### 13.2 UNHCEMS® - Chemical Inventory and Training

Chemicals maintained at the University of New Hampshire Manchester's campus are recorded and tracked using the UNH Barcode system, which links chemical containers to the UNHCEMS® online inventory program.

Data maintained in UNHCEMS® regarding the chemical inventory at UNH at Manchester from 20010 through 2021 is summarized in Table 16, below.

Table 16 Chemical Inventory Statistics for University of New Hampshire Manchester			
Year	Removed Containers	Added Containers	Active Containers
2010	68	36	577
2011	12	11	576
2012	44	38	570
2013	29	48	589
2014	62	32	559
2015	58	59	560
2016	31	60	557
2017	14	150	693
2018	29	134	798
2019	97	162	863
2020	18	84	927
2021	21	161	1,067

#### 13.3 Contingency Planning

A contingency plan was prepared for the University of New Hampshire Manchester campus in 2016 and (updated in 2021). The plan was created to establish preparedness, planning, spill response and spill notification procedures for hazardous materials at this campus. The University of New Hampshire at Manchester campus does not meet the minimum threshold quantities requiring a formal ICP or SPCC as prescribed by the US EPA Oil Pollution Prevention Regulations (40 CFR Part 112) and Hazardous Waste Regulations (40 CFR 260-265), the New Hampshire Hazardous Waste Rules (Env-Hw 100-1100) or the OSHA Emergency Response requirements for facilities engaging in hazardous waste operations (29 CFR 1910.120). However, a modified ICP was prepared as a best management practice for responding to spills for the limited quantity of hazardous materials stored at this campus.

Included within the contingency plan is a list of emergency contacts for the UNH Manchester facility and city and state agencies, a spill release response reporting quick reference summary, Initial Spill/Release Response Flow Chart and Spill Response Reporting Flow Chart, and a copy of the Emergency Assistance Agreement Response Form signed by the City of Manchester Fire Chief. The plan was amended in 2021 to include changes to local contacts and new UNH contacts.

#### 14.0 UNH Franklin Pierce School of Law

#### 14.1 Emergency Health and Safety Committee

The UNH Franklin Pierce School of Law established a formal EHSC in 2015. The charge of the Committee is to assure a safe work environment for faculty, staff, students and visitors through the creation and maintenance of effective health and safety programs. The EHSC reports to the UNH Law SchoolDean and the Office of the Provost and Vice President for Academic Affairs on matters related toemergency preparedness, industrial hygiene, and workplace safety compliance. Specific tasks include:

- Develop, review, and update written programs and procedures to ensure compliance with OSHA, New Hampshire Department of Labor and other applicable regulations, and recognized consensus safety standards;
- Serve as an advisory body to the UNH Environmental Health and Safety Committee on policies and procedures to ensure the health and safety of all faculty, staff, students, and visitors at UNH-M; and
- Obtain and analyze available data on past injuries and illnesses, identify trends, and suggest appropriate corrective actions.

The EHSC is a deliberative body that is representative of the Franklin Pierce community and includes members from academic and administrative divisions on campus. It is the committee's responsibility to advise the Dean, and to administratively coordinate the various safety-related

efforts of the university community. Full voting membership of the EHSC includes the Facilities Manager, the Security Supervisor, the Reference and Public Services Librarian, the SR Human Resource Assistant, the Information Technology Administrator, the UNH Director of Environmental Health and Safety and the UNH Assistant Director of Emergency Management. Chair and Vice-Chair are elected for 3-year terms with a majority vote. The EHSC Chair is a member of the UNH Environmental Health and Safety Committee.

#### 14.2 Other Accomplishments

Other accomplishments completed by the UNH Franklin Pierce School of Law EHSC in 2021 include, but are notlimited to:

- The school's Emergency plan is available via "Quick Link" from the UNH Law website.
- Captain Lee and Sergeant MacLennan of the UNH Police department gave an active shooter training to law school staff.

#### 15.0 Emerging Issues

#### 15.1 Staffing Disruptions

USNH institutions were challenged in 2021 with a high number of retirements and resignations; this staffing disruption affected EHS programs directly as experienced staff retired or resigned and indirectly as talented faculty and staff who helped maintain a culture of safety left USNH. These staff disruptions could have a significant effect on USNH EHS programs. How effectively these staff resources are replaced with qualified replacements and the extent to which staff disruptions continue will determine overall impact on USNH EHS operations.

#### 15.2 COVID-19 Management and Response

OEHS will continue to dedicate staff resources to managing campus issues related to the global pandemic. Committee work will continue in 2022 to improve and update response efforts. OEHS efforts have largely focused on support of essential field and laboratory research programs, and it is likely these efforts will continue in 2021. OEHS will continue to support operation of the COVID testing lab wit hazardous waste management, biosafety support services, and laboratory safety services.

#### 15.3 UNH Ice Rink Upgrades

In 2022 UNH has embarked on the construction of a new and upgraded ice rink. This new rink will still utilize Ammonia for refrigeration. As such, EH&S will work with campus stakeholders to maintain compliance with the USEPA for Ammonia Refrigeration Systems by ensuring proper management plans are in place for safely maintaining the refrigeration system and responding to emergencies.

#### 15.4 UNHCEMS® 3.0 Development

OEHS staff are integral members of the UNHCEMS® development team. Through 2021 the OEHS UNHCEMS® Administrator and others in the OEHS office have been supporting the development of UNHCEMS® 3.0. UNH OEHS works with the UNH Project Manager (RCC) to assist in guiding the design of the new UNHCEMS®. This multi-year project includes project team meetings to design, build and test the latest version of UNHCEMS®. This effort will be a from scratch recode and design of UNHCEMS®. UNH OEHS staff will be working with members of the Research Computing Center and the UNHInnovations team.

#### 16.0 Communication and Outreach

OEHS uses many ways to communicate our mission to the campus. The department also provides invaluable information to the general public. This is accomplished in the form of a departmental website (Figure 36), face-to-face and group meetings, electronic communications, telephone consultations, on-site investigations, group trainings, and other effective communication methods.

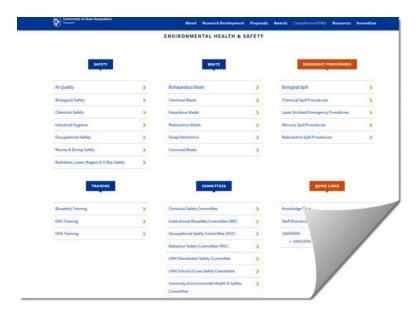


Figure 36: OEHS Home Page

The minutes of the Chemical, Occupational, and Radiation Safety meetings are posted on the website for full public disclosure of our activities. OEHS staff members serve as representatives on these regulatory committee meetings, and attend other meetings of interest to the campus, such as building construction and renovation meetings, the Energy Task Force, the Ecosystems Task Force, the University Emergency Group, as well as ad-hoc meetings when new issues arise.

OEHS produces and distributes many pamphlets and educational materials that cover a wide variety of health and safety topics. As a general practice, the technical experts in OEHS share their programs as much as possible.

#### 17.0 Mechanisms to Measure Compliance

UNH utilizes several mechanisms to assure the campus is meeting the elements and objectives of the campus EH&S programs discussed in this report. These include outside audits, regulatory inspections, technical committee oversight, OEHS program review and USNH EH&S Council review. Examples are highlighted below.

#### 17.1 Industrial Hygiene

Indoor air quality and toxic material exposure assessments are conducted by OEHS, outside consultants, or by the campus Worker's Compensation Insurer depending on the complexity of the issue. Data collected during assessments are compared to current regulatory exposure limits and recommended industry guidelines. The New Hampshire Department of Labor reviews notifications regarding proposed asbestos abatement and is the regulatory agency responsible for governing abatement in New Hampshire.

#### 17.2 General Safety

OEHS and the campus Worker's Compensation Insurer conduct quarterly independent safety audits of targeted areas. OEHS utilizes injury and illness trending data compiled by UNH's Workers Compensation insurer to focus safety initiatives. OEHS works with colleges and departments to maintain an electronic environmental health and safety training database for affected faculty, staff, and students. This centralized record keeping process enables OEHS and/or managers to generate queries of individual staff or area departments that are due for safety training. These reports aid in the scheduling of safety training and ensure that all necessary training is completed. Procedures for particularly hazardous work such as hot work, confined space entry, and asbestos and/or lead abatement require a reporting procedure that involves regular communication and oversight from OEHS with additional assistance from the Durham Fire Department and State agencies, as necessary.

#### 17.3 Fire Protection

Both the Durham Fire Department and the State Fire Marshal's Office conduct fire and life safety inspections of campus buildings. Fire suppression and fire alarm systems are tested and certified by outside consultants.

#### 17.4 Occupational Health and Medicine

Medical screening and surveillance programs are implemented by departments utilizing the services of either UNH Health and Wellness or outside occupational health services organizations. Faculty, staff, and student compliance with the animal handler medical surveillance program is reviewed jointly by OEHS and the Office of Research Integrity Services on a monthly basis.

#### 17.5 Disaster Preparedness

UNH has implemented an Emergency Action and Procedures Plan that outlines procedures to be followed by the campus community for responding to and recovering from fires, hazardous materials spills, and major accidents. Specific procedures to follow for fire evacuation are listed in the plan. Nobis Engineering, Inc. was hired to conduct a thorough review of the UNH Integrated Contingency Plan to ensure compliance with federal and state regulations.

OEHS liaises with UNH Police for annual reviews of Emergency Procedures and Action Plans.

#### 17.6 Diving Safety

All aspects of the UNH research diving program are reviewed annually by the UNH Diving Safety Control Board.

#### 17.7 Biological Safety

The UNH IBC reviews and approves all biohazardous material use on campus, including use of recombinant and synthetic nucleic acid molecules, for compliance with the National Institutes of Health Guidelines. OEHS conducts laboratory audits to assure proper biosafety procedures are being followed in the laboratory. Laboratories using human source materials are kept in compliance with the OSHA Bloodborne Pathogens Standard through training, strict use of Universal Precautions, sharps surveys and Hepatitis B vaccine offerings.

#### 17.8 Hazardous Materials Inventory and Reporting

The U.S. Department of Transportation and the Federal Aviation Administration perform unannounced inspections and audits of the shipping program as part of a regional initiative to enforce hazardous materials shipping regulations at colleges and universities.

#### 17.9 Hazardous Waste Management

OEHS provides regular oversight and review of laboratories and shops that generate and store hazardous waste. The NHDES and the U.S. Environmental Protection Agency conduct unannounced inspections of the hazardous waste management program at colleges and universities. OEHS staff conducted a review of the CHWAA Preparedness, Prevention and Contingency Plan, the Hazardous Waste Transporter Contingency Plan, and the Central Accumulation Area Security Plan.

#### 17.10 Radiation Safety

Radiation safety oversees both ionizing and non-ionizing radiations and inspects all laboratories that contain radioactive material quarterly, performs contamination surveys, radiation surveys and compliance audits, and ensuring all laboratories continue to meet all license conditions, as well

as all state and federal regulations. The Radiation Safety Program is audited annually by an outside consultant. Results of the audit are shared with the Radiation Safety Committee and the Committee approves any changes to the Radiation Protection Program recommended by the audit consultant.

#### 17.11 Laboratory Safety

OEHS receives chemicals ordered by laboratory chemical users at the university. Upon arrival, these chemicals are barcoded, entered into CEMS and delivered to the chemical user for use. OEHS additionally performs laboratory chemical fume hood evaluations on an annual basis as well as after disruptive events, which could include unplanned power outages, repair completions, preventive maintenance, and user requests. In 2021, during both chemical deliveries and fume hood evaluations, any observations of laboratory safety issues were addressed in coordination with the laboratory users in lieu of formal inspections due to the pandemic.

## USNH Council on Environmental Health and Safety Annual Report - December 2021

UNH Compliance Status December 2020 and December 2021

Program Elements	2020	2021
3.3.3.1.1 Injury and Illness Prevention		
3.3.3.1.2.1 Industrial Hygiene		
* Asbestos Abatement		
* Lead Abatement		
* Hearing Conservation		
* Indoor Air Quality		
* Personnel Exposure Monitoring for Toxic Materials		
* Respiratory Protection		
* Hazard Communication (GHS)		
* Heat Stress		
* Illumination		
3.3.3.1.2.2 General Safety		
* Confined Space		
* Fall Protection		
* Ergonomic Evaluation		
* Lock-Out/Tag -Out		
* Accident Investigation		
* Powered Industrial Trucks		
* Cranes & Hoists		
* Mobile Elevating Work Platform		
* Dig Safe Program		
* Bloodborne Pathogens		
* Workplace Safety Inspections		
3.3.3.1.2.3 Radiation Safety & Laser Safety		
* Radioactive Material License		
* Radiation Safety Committee		
* Radioactive Material Inventory		
* Radiation Safety Manual		
* User/Awareness Training		
* Radiation Safety Laboratory Inspections		
* Dosimetry		
* Magnet Safety		
* X-Ray Safety		
* Radioactive Waste Management		
* Laser Safety		
LEGEND		
Program in place		
Program undergoing review, improvement, or under development		
Program not in place		
Not Applicable		

# USNH Council on Environmental Health and Safety Annual Report - December 2020

UNH Compliance Status December 2020 and December 2021

Program Elements	2020	2021
3.3.3.1.2.4 Occupational Health and Medicine		
* Respirator Medical Questionnaire  * Hepatitis B Vaccination		
* Animal Handlers Occupational Health		
*		
<ul><li>3.3.3.1.2.5 Integrated Contingency Planning</li><li>* Aboveground Storage Tank Program</li></ul>		
* Underground Storage Tank Program		
* Integrated Contingency/Spill Prevention Control and Countermeasures Plan		
3.3.3.1.2.6 Biological Safety		
* Institutional Biosafety Committee		
* Biosafety Manual		
* Recombinant DNA Registration		
* Biosafety Laboratory Surveys		
* Inventory of Infectious Material		
* FDA Food Biosecurity Application		
3.3.3.1.2.7 Diving Safety		_
* Diving Safety Control Board		
* Diving Safety Officer		
Diving Safety Manual		
3.3.3.2 Hazardous Materials & Environmental Management		
3.3.3.2.2.1 Hazardous Waste Management		
* Hazardous Waste Management Program		
* EPA Identification Number		
* Faculty/Staff/Student Training		
* Contingency Plans for Central Accumulation Area		
* Satellite Accumulation Area Inspections		
* Universal Waste Management		
* Biohazardous Waste Management		
3.3.3.2.2.2 Hazardous Materials Inventory and Reporting		
* Chemical Environmental Mgmt System/Inventory System		
* DEA Controlled Substances Inventory		
* DHS Chemicals of Interest Inventory		
* Community Right To Know/SARA Title III		
* Safety Data Sheets		
* Chemical Safety/Hygiene Plan		
* Chemical Laboratory Inspections		
* Chemical Safety Committee		
* Title 5 Air Permit		
* Stormwater Management Plan		
* Refrigerant Management Plan		
* Water Quality Permits		
* Hazardous Materials Shipping		



# University System of New Hampshire

# USNH Environmental Health and Safety Annual Report – 2021 University System of New Hampshire Central Offices

#### 1. MISSION STATEMENT

The University System of New Hampshire's Central Office is committed to providing and maintaining a safe environment for its employees and visitors. USNH focuses on fire and life safety, hazardous material management, accident prevention, industrial hygiene, and safety and health training. The University System of New Hampshire Central Office complies with all required federal, state and local statutes and with USNH Policy.

#### 2. AUTHORITY

USNH Board of Trustee Policy (BOT VI.F.1.3) The Presidents, in collaboration with the Chancellor (currently Chief Administrative Officer), shall establish procedures to ensure the prudent management of environmental health and safety in compliance with applicable state and federal laws. Those procedures shall include coordination with a USNH Council on Environmental Health and Safety, with representation from each component institution. These procedures shall also include, where appropriate, a mechanism for measuring compliance through appropriate means including periodic environmental audits. The Chief Administrative Officer shall coordinate presentation to the Audit Committee of an annual report describing the state of the University System's environmental health and safety efforts at each institution, including the findings of any environmental audit conducted during the reporting period.

#### 3. CAMPUS PROGRAM ELEMENTS

The USNH Joint Loss Management Committee provides support for the System Office at 5 Chenell Drive, Concord, NH. Meetings occur quarterly and include representation from multi departments. Minutes of the System Office Joint Loss Management Committee are taken, reviewed and maintained.

#### 4. INJURY AND ILLNESS PREVENTION

#### A. Industrial Hygiene

This program is not applicable at the University System Central Offices

#### **B.** General Safety

Injury control is the primary issue for the University System Central Offices. Accident investigation is performed when an illness/injury report is filed with the office of Human Resources. Recommendations are made, if necessary, to prevent recurrence. Workplace Safety Management Consultants from MEMIC are available to assist with accident investigations and risk management oversight for employees. Identify and reduce potential risks for office COVID-19 transmission by spacing and limiting numbers of employees in the office. Adding physical barriers and providing space for social distancing.

#### C. Radiation Safety

This program is not applicable at the University System Central Offices.

#### D. Fire Protection

The USNH Facility Supervisor performs annual site and safety inspections of Central Offices at 5 Chenell Drive. Part of the inspection addresses fire and evacuation routes and planning procedures. Evacuation drills are held annually. The fire alarms are tested annually by FiveKph, LLC (property owner), Thomas H. Balon Jr. 15 Merrill Street, Manchester NH 03103.

#### E. Occupational Health and Medicine

This program is not applicable at the University System Central Offices.

#### F. Disaster Preparedness

USNH has emergency evacuation procedures which address evacuation in case of disasters. USNH Central Offices participate in the UNH Alert system administered by the UNH Police Department. This system allows USNH to contact staff during an emergency by sending text messages to staff emails, cell phones, pagers and blackberries/smart phones.

#### G. Biological Safety

This program is not applicable at the University System Central Offices.

#### H. Diving Safety

This program is not applicable at the University System Central Offices.

#### 5. HAZARDOUS MATERIALS & ENVIRONMENTAL MANAGEMENT

#### A. Hazardous Waste Management

The USNH Central Offices deals with a small amount of hazardous waste. Identifiable waste streams include fluorescent light bulbs, copier machine and laser printer toner and outdated computer equipment. The Facility Supervisor is responsible for the disposal of all of the above mentioned items. Electronic equipment is disposed of via the UNH IT Safe Electronic Equipment Disposal (SEED) program.

#### B. Hazardous Materials Inventory and Reporting

There are janitorial cleaning supplies located on site. Safety Data Sheet information is posted on site and janitorial employees are trained on the proper use of cleaning supplies.

#### 6. MECHANISMS FOR COMPLIANCE

The USNH Facility Supervisor ensures the compliance with safety policies by performing site evaluations and contracting with environmental specialists to assist with internal audits. Annual items reviewed include: facility safety issues and procedures, evacuation drills, (including the conducting of drills), the posting of emergency exit signs and diagrams, fire extinguishers inspections, and the removal of hazardous materials as outlined in 5A. The Facility Supervisor provides the System Office Joint Loss Management Committee regular updates on the results of the evaluations and audits and on efforts to mitigate any items of concern noted in the reports.

### USNH Council on Environmental Health and Safety Annual Report - December 2021

USNH Compliance Status December 2020 and December 2021

Program Elements	2020	2021
3.3.3.1.1 Injury and Illness Prevention 3.3.3.1.2.1 Industrial Hygiene  * Asbestos Abatement  * Lead Abatement  * Hearing Conservation  * Indoor Air Quality  * Personnel Exposure Monitoring for Toxic Materials  * Respiratory Protection  * Hazard Communication (GHS)  * Heat Stress  * Illumination		
* Confined Space  * Fall Protection  * Ergonomic Evaluation  * Lock-Out/Tag -Out  * Accident Investigation  * Powered Industrial Trucks  * Cranes & Hoists  * Mobile Elevating Work Platform  * Dig Safe Program  * Bloodborne Pathogens  * Workplace Safety Inspections		
* Radioactive Material License  * Radioactive Material License  * Radioactive Material Inventory  * Radiation Safety Manual  * User/Awareness Training  * Radiation Safety Laboratory Inspections  * Dosimetry  * Magnet Safety  * X-Ray Safety  * Radioactive Waste Management  * Laser Safety		
LEGEND Program in place Program undergoing review, improvement, or under development Program not in place Not Applicable		

# **USNH Council on Environmental Health and Safety** Annual Report - December 2021 USNH Compliance Status December 2020 and December 2021

Program Elements	2020	2021
3.3.1.2.4 Occupational Health and Medicine  * Respirator Medical Questionnaire  * Hepatitis B Vaccination  * Animal Handlers Occupational Health	•	•
<ul> <li>3.3.3.1.2.5 Integrated Contingency Planning</li> <li>* Aboveground Storage Tank Program</li> <li>* Underground Storage Tank Program</li> <li>* Integrated Contingency/Spill Prevention Control and Countermeasures Plan</li> </ul>	•	•
* Institutional Biosafety Committee  * Biosafety Manual  * Recombinant DNA Registration  * Biosafety Laboratory Surveys  * Inventory of Infectious Material  * FDA Food Biosecurity Application	•	•
* Diving Safety Control Board  Diving Safety Officer  Diving Safety Manual	•••	•
3.3.3.2 Hazardous Materials & Environmental Management 3.3.3.2.2.1 Hazardous Waste Management Program  * Hazardous Waste Management Program  * EPA Identification Number  * Faculty/Staff/Student Training  * Contingency Plans for Central Accumulation Area  * Satellite Accumulation Area Inspections  * Universal Waste Management  * Biohazardous Waste Management		
3.3.3.2.2.2 Hazardous Materials Inventory and Reporting  * Chemical Environmental Mgmt System/Inventory System  * DEA Controlled Substances Inventory  * DHS Chemicals of Interest Inventory  * Community Right To Know/SARA Title II  * Safety Data Sheets  * Chemical Safety/Hygiene Plan  * Chemical Laboratory Inspections  * Chemical Safety Committee  * Title 5 Air Permit  * Stormwater Management Plan  * Refrigerant Management Plan  * Water Quality Permits  * Hazardous Materials Shipping		