

**VA NORTHEAST OHIO HEALTHCARE SYSTEM  
Louis Stokes Cleveland DVAMC  
Medical Research Service  
Subcommittee on Research Safety Policy**

**Effective Date: JULY 20, 2022**

**Policy Title: RISK ASSESSMENT POLICY**

**Policy Number: SRS--013**

**Policy Version: .10**

**Author:**

Name: John M. Schaffer, B.A  
Title: Research Safety Coordinator  
Department: Medical Research Service

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**John M. Schaffer, B.A.**

**Reviewed By:**

**Chair/Subcommittee on Research Safety:**

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**Krisztina M. Papp-Wallace, Ph.D.**

**Approved By:**

**Associate Chief of Staff/Research**

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**Neal S. Peachey, Ph.D.**

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1. **PURPOSE:** To establish a program that requires the assessment of duties and procedures in Medical Research Service for potential hazards to personnel. This assessment will be used to determine proper barriers to prevent personnel exposure to hazardous materials and proper procedures to prevent possible injury.

This policy supports OSHA Standard 1910.132(a), which cites that, “Protective equipment, including personal protective equipment for eyes, face, head, and extremities, protective clothing, respiratory devices, and protective shields and barriers, shall be provided, used, and maintained in a sanitary and reliable condition wherever it is necessary by reason of hazards of processes or environment, chemical hazards, radiological hazards, or mechanical irritants encountered in a manner capable of causing injury or impairment in the function of any part of the body through absorption, inhalation or physical contact.”

2. **POLICY:** A Risk Assessment will be conducted for tasks that pose a hazard(s) to personnel. Assessments will be performed using a Risk Assessment form, which identifies the following potential hazards: gas, liquid/vapor, particulate (dust, fiber, fume), radiation, biological, noise, and other hazards, e.g., ergonomic, etc.

This assessment also includes the Personal Protective Equipment (PPE) each employee must wear to prevent exposure to hazardous materials.

3. **DEFINITIONS:**

- a. OSHA – Occupational Safety and Health Administration
- b. PPE – Personal Protective Equipment
- c. SRSS – Subcommittee on Research Safety and Security
- c. RSC – Research Safety Coordinator

4. RESPONSIBILITIES:

a. Principal Investigator/Laboratory Supervisor:

(1) Supplies necessary PPE for laboratory personnel.

(2) Submits an Amendment/Modification to the Subcommittee on Research Safety and Security (SRSS) through IRBNet as a new package when a protocol change occurs to an approved project that involves the addition of a chemical, piece of equipment, etc.

(3) Completes a Risk Assessment form specific for their laboratory.

(4) Ensures that each employee reviews and signs a laboratory Risk Assessment form.

b. Employee:

(1) Reviews the Risk Assessment form for his/her job and can demonstrate an understanding of this information to his/her immediate supervisor.

(2) Consistently utilizes the PPE as instructed.

(3) The employee is responsible for notifying his/her supervisor or the Research Safety Coordinator when unsafe work situations exist.

(4) The employee is responsible for complying with this and all Medical Center and Medical Research Service Policies.

c. RSC

(1) Reviews new projects and amendments/modifications submitted to the SRSS.

(3) Coordinates the completion of annual laboratory Risk Assessment forms, which are completed by Principal Investigators in Medical Research Service.

(2) Contacts the Industrial Chemical Hygienist, Facility Safety Office, and requests that a review of a Principal Investigator's laboratory Risk Assessment to be conducted.

c. Industrial Chemical Hygienist

Reviews laboratory Risk Assessment forms to determine that proper barriers to prevent personnel exposure to hazardous materials and proper procedures to prevent possible injury are documented.

5. REFERENCE: OSHA Standard 1910.132(a),

6. RESCISSION: The rescission date of SRSS Policy 013, Risk Assessment Policy, is July 19, 2027.

7. FOLLOW UP: Research Safety Coordinator.