

U.S. Army Medical Research and Materiel Command (USAMRMC) Safety GRANT PREPARATION REQUIREMENTS

INTRODUCTION

DOD Army Grants require a DOD approval of a Washington State University Safety Plan and written assurances that the Principle Investigator (PI) is complying with WSU's safety and health policies and programs. The purpose of the policies and programs is to assure the PI has identified and eliminated and/or controlled hazards associated with the research funded by the grant.

Environmental Health & Safety (EH&S) has obtained a five-year DOD institutional approval for the overall Washington State University Safety Plan. However, DOD further requires that for each grant submitted, research specific safety programs and policies must be implemented. These research specific safety programs and policies include a Chemical Hygiene Plan (in the form of WSU's Laboratory Safety Manual (see <http://www.ehs.wsu.edu/LSM/wsulsmhome.asp>) and Standard Operating Procedures). Additional plans and safety considerations might also be required depending on the type of research performed, these are listed on the "Washington State University Principal Investigator Compliance" form (see Attachment B).

REQUIRED PLAN AND FORMS

In applying for a DOD Army Grant, DOD requires a written "Proposal Safety Plan" (see below) and a signed "Certificate of Environmental Compliance" form. The documentation indicates the appropriate safety programs and policies will be implemented before research begins. Additionally, WSU requires an internal compliance form ("Washington State University Principal Investigator Compliance" form - Attachment B) be completed by the PI and submitted to EH&S.

STEPS TO FOLLOW

The following steps should be followed to assure the necessary safety related forms are completed before grant submittal.

1. Complete the "Proposal Safety Plan". In applying for a DOD Army Grant, a "Proposal Safety Plan" must be submitted. The "Proposal Safety Plan" includes:
 - List of Hazards,
 - (If applicable) Written approval letter from the organization's Institutional Bio-safety Committee if research involves recombinant DNA. The research must meet or exceed National Institutes of Health (NIH) Guidelines for Research Involving Recombinant DNA Molecules, and
 - Signed "Principal Investigator Assurance" form (See Attachment A); the PI completes this form.

The PI completes the "Proposal Safety Plan" and submits a copy with the grant and provides a copy to EH&S.

2. Complete the "Washington State University Principal Investigator Compliance" form (see attachment B). This form is NOT submitted to DOD. A copy is provided to EH&S.
3. After Steps 1 and 2 are completed, the PI will enter the Title of the Study, and the PI's Name and Title on the "Certificate of Environmental Compliance" (see Attachment C). The PI will submit this form with the completed "Proposal Safety Plan", "Principal Investigator Assurance" form, and "Washington State University Principal Investigator Compliance" form to EH&S for signature. The PI includes the signed form (Attachment C) and the "Proposal Safety Plan" in the grant submittal.
4. If the grant is awarded, the PI will be required to notify EH&S if any changes are made to their "Proposal Safety Plan". Notifications are due by January 20th of each year. This notification will assist EH&S in preparing the annual "Facility Safety Plan Status Report" (See Attachment D) and meet requirements on the "Principal Investigator Assurance" form. Submit annual notifications to dgransbery@wsu.edu or mail-stop 1172.

EH&S offers a variety of safety and health services to assist in providing a safe and healthy work environment. Contact EH&S for assistance / annual notification at 335-3041 or visit web site at <http://www.ehs.wsu.edu> for additional information.

Principal Investigator Assurance

- I assure that I have involved the Facility Safety Director/Manager in the planning of this research proposal, discussed with him/her all aspects of the proposal that relate to occupational health and safety, and will help him/her prepare the annual Facility Safety Plan Status Report.
- I assure that I will comply with my institution's safety program and its requirements.
- I understand that I am directly responsible for all aspects of safety and occupational health specific to my research protocol.
- I assure that I will report to the Facility Safety Director/Manager any changes in the safety or occupational health practices due to changes in my originally planned research.
- I assure that hazards associated with my research have been identified, eliminated and/or controlled.
- I assure that all Safety Plan requirements are in compliance with 32 CFR 626 and 627, "Biological Defense Safety Program and Biological Defense Safety Program, Technical Safety Requirements" (*if applicable*).

Name of Principal Investigator (print)

Signature

Date

Mailing Address: _____

Street

City

State

Zip Code

Phone Number: _____

Fax: _____

E-mail Address:

WASHINGTON STATE UNIVERSITY
Principal Investigator Assurance Compliance Form

Principal Investigator _____

Date _____

Department _____

Location _____

Proposal Title _____

I assure I will comply with all aspects of environmental, safety and occupational health requirements specific to my research and the WSU Safety Policy and Procedures Manual. If at any time my research results in a significant impact on the environment or a violation of any applicable safety policy and procedure, environmental, health or safety, law or regulation, I will immediately take appropriate remedial action, that includes notifying the Environmental Health and Safety Department. If the grant is awarded, I will notify EH&S of any changes made to the proposal and provide a Safety Plan Status Report (See Attachment D) to EH&S by January 20th of each year.

I am aware of the Washington State University policies listed below. I understand, will follow, and enforce their requirements. I will have all applicable written programs in place and assure all personnel involved in my research have been trained and will follow the policies and procedures specific to the research before research begins.

- I have Initialed and dated all Manuals / Policies that are applicable to my research.
- If the Manuals / Policies listed below do not apply to my research, I have indicated Not Applicable (N/A), initial, and date.

<u>MANUALS / POLICIES</u>	<u>INITIAL</u>	<u>DATE</u>
• Safety Policy and Procedures Manual	_____	_____
• Lab Safety Manual (Chemical Hygiene Plan)	_____	_____
• Bio Safety Plan	_____	_____
• Exposure Control Plan for Blood Borne Pathogens	_____	_____
• Institution Animal Care and Use Committee Requirements	_____	_____
• Radiation Safety	_____	_____
• Environmental Services / Hazardous Waste	_____	_____
• 32 CFR 626 and 627 (Biological Defense Safety Program and Biological Defense Safety Program, Technical Safety Requirements	_____	_____

Signature _____

Date _____

Mailing Address _____

Phone Number _____

Fax _____

E-mail Address _____

Safety Plan Status Report

If Grant is awarded, a Safety Plan Status Report must be submitted annually to Environmental Health and Safety (Mail-Stop 1172), no later than January 20th. Provide a brief description of any parts of the Proposal Safety Plan that may have changed during the past 12 months. (Additional pages may be attached.)

During the past 12 months:

1. Have any change(s) in Research Operation Safety Procedure(s) been made?

Yes _____ No _____

If yes, briefly describe:

2. Have any modifications to the facility, equipment, and description (e.g., new equipment purchased, hood ventilation certification) been made?

Yes _____ No _____

If yes, briefly describe:

3. Hazard Analysis: Have any new hazards been identified for any of the awards supported by the U.S. Army Medical Research and Material Command (USAMRMC)?

Yes _____ No _____

If yes, provide a hazard analysis for each new hazard.

4. Radioactive Materials: Have any significant change(s) occurred in the use of the radioactive materials?

Yes _____ No _____

If yes, briefly describe:

Are there any additional radioactive materials in use?

Yes _____ No _____

If yes, list additional material(s).

Is the radioactive material licensure current?

Yes _____ No _____

If no, please explain.

I certify that all of the above elements are true and correct to the best of my knowledge, and I assure the research area provides a safe environment for the employees working in research laboratories in accordance with WSU's safety and health policies and programs. I provide employee safety training and periodic laboratory inspections in an effort to minimize, eliminate, or control potential hazards to the employees and the public.

I understand that the Safety Office, U.S. Army Medical Research and Material Command may conduct periodic site visits in order to ensure the indicated elements are in compliance.

Principal Investigator _____

Date _____

Department _____

Location _____

Proposal Title _____

