THE
UNIVERSITY
OF RHODE ISLAND

PROCEDURES for the Policy on Environmental Health and Safety

Policy #: 02.113.2

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PROCEDURES for the Policy on Hazardous Materials and Laboratory Move-Ins and Cleanouts

Policy #: 02.111.3

Monitoring, Recording, and Remediating Environmental Health & Safety Compliance Violations

Last Revised: July 15, 2026

I. Introduction

Research in laboratories often involves dangerous chemicals, complex equipment, and harmful pathogens. These elements can present severe personal and environmental health hazards if not properly handled or controlled. Laboratories must outline and implement stringent safety protocols to prevent accidents and lower the risk of uncontrolled encounters with hazardous substances. Failure to do so can result in more than just a hefty fine; it could lead to devastating environmental impacts, serious injury, and even death.

This procedure is intended to support and enforce the lab safety compliance requirements of the Policy on Environmental Health and safety and Policy and Procedures on Hazardous Materials and Laboratory Move-Ins and Cleanouts.

Questions regarding these procedures should be directed to the Coordinator, Environmental Health and Safety.

II. Compliance Monitoring

Roles and responsibilities of PI/Supervisor to monitor, detect, and remediate violations in a timely manner.

- Conduct monthly self-inspection of the laboratory and correct non-compliance issues. Review non-compliance issues with other lab users.

- Maintain accurate chemical inventories and ensure that proper chemical segregation is enforced.
- Report faulty equipment (fume hood, electrical outlets, plumbing, eyewash stations, etc.) to the appropriate department immediately and follow up on corrective actions.
- Ensure that all lab users have completed lab safety and hazardous waste management training prior to working in the lab.
- Ensure that all lab users are entered into Onsite Lab Safety Software (Onsite) in order to view and close out violations.
- Report all accidents, injuries, and near misses to the Office of Environmental Health & Safety (OEHS) and fill out applicable forms.
- Ensure that all laboratory deficiencies discovered and reported during OEHS's laboratory inspections are corrected in a timely manner and that those corrections are documented.
- EH&S will maintain a sufficient monitoring plan to ensure timely prevention, detection, and remediation of violations. The plan includes a schedule of lab inspections, lab move-in and cleanout reviews, safety visits, unannounced inspections, etc.

A. Lab Inspections

Lab inspections are performed to evaluate the implementation of appropriate laboratory safety principles and practices, identify any deficiencies, and provide guidance to assist lab personnel to create a safer laboratory environment. Lab inspections assess for compliance with applicable research or laboratory safety regulations, standards and guidelines, and University policy and procedures. Policy and procedures are outlined in EH&S's Chemical Hygiene Plan (CHP), a copy of which is located on the main EH&S web page.

Prior to entering the lab, inspectors will log in to Onsite to review the following:

- Chemical inventory to check to see if new chemicals are barcoded and added to the system and removed from the system.
- Ensure that standard operating protocols are created for certain chemicals per URI's Chemical Hygiene Plan and that those protocols have been uploaded, reviewed and finalized.
- All lab users have been entered into Onsite and have completed all required safety training.

Once an inspector enters the lab, the inspector will examine areas where chemical, biological, and radioactive material are used or stored. They will open and inspect storage cabinets, fume hoods, biological safety cabinets, refrigerators, freezers, drawers near laboratory benches, and under sinks. Hazardous and non-hazardous satellite accumulation areas (SAAs) are also inspected for compliance with EPA regulations.

EH&S conducts inspections of all University laboratories handling or storing hazardous chemicals. These inspections evaluate the following:

- Potential employee exposures (qualitative assessments);
- The status of critical engineering control equipment (hoods and safety showers);
- The handling and storage of chemicals;
- Completed and signed standard operating procedures for certain chemicals, equipment and/or processes;
- The use of personal protective equipment;
- Hazardous waste management (labeling and containment);
- Employee training; and
- Compliance with Federal/State regulations and University policies.

Responsibilities of Lab Users and Visitors

As described in the Policy on Environmental Health and Safety, employees, students, laboratory workers, trainees who use the lab are responsible for reading, understanding, and following all safety rules and regulations as outlined in the CHP. The Principal Investigator and Supervisors are responsible for ensuring that the personnel and operations in their lab areas comply with laws, regulations, and University policy and procedures. The Environmental Health and Safety Office, or designated independent safety expert, is responsible for performing inspections. Principal Investigators or their designated lab manager are required to conduct self-lab inspections on a monthly basis.

Frequency

Annual Lab Safety Inspections are required for all laboratories, chemical storage locations, and waste management centers at the University. EH&S may adjust the frequency or scope of the inspection based on changes in the level of risk. EH&S will also schedule additional safety visits, walk-throughs and unannounced inspections as necessary.

Notification

EH&S will provide notice at least seven days in advance of an annual lab inspection. The PI and EH&S will agree upon a date/time for the inspection.

EH&S will provide 48-hour notice in advance of any ad hoc safety visits, walk-throughs, etc. EH&S may also perform unannounced inspections which do not require advance notice, especially in the case of pending federal or state inspections or safety complaints.

Preparation

EH&S recommends that lab users conduct a laboratory self-inspection prior to the inspection. A self-inspection report can be found in Onsite Systems, under “Inspections” and “Inspection Categories”. Additionally, a lab inspection general checklist that can be printed out is also available on EH&S’s “*Chemical Safety*” tab, under “*Lab Safety Self Inspection Form*” and also included in this document as Attachment D. EH&S is available to answer any questions that may arise during completion of a self-inspection checklist by contacting us directly or by emailing us at srm@etal.uri.edu.

Prior to inspection, all lab users must be entered into Onsite Laboratory Safety software. Instructions on how to access your personal Onsite dashboard and add lab users can be found in Attachment A and Attachment B respectively of this document and by going to the main EH&S page and clicking on the tile titled “*On Site Systems Laboratory Safety Software*”.

Inspection

EH&S will enter the lab using our swipe card. In some labs, we may request that a PI or student provide entry (particularly for older buildings). EH&S prefers that a lab user (postdoctoral or graduate student) is available during the inspection to correct some non-compliance issues in real time, particularly violations that are considered a “severe risk” and/or provide answers to any questions that may arise regarding research activities, chemical use and other lab safety issues.

Typically, lab inspections may last from 30 minutes to several hours, depending on the number of staff and students within the lab, the number of chemical containers, and the overall condition of the lab. Neat, orderly labs that conduct monthly self-inspections of their space will have considerably shorter inspections.

During a lab inspection the inspector will ask prepared questions that reflect OSHA, EPA and NFPA regulatory requirements, as well as URI policies.

Lab Move-in and Cleanout Reviews

Laboratory Move in and Cleanout Policy is a separate URI policy that requires notification of any incoming and vacating PI so that their lab can be prepared or cleaned out in an orderly manner. Refer to URI policy (https://web.uri.edu/policies/) for additional information.

B. Safety Visits, Inspections, Observations, Record Reviews, & Other Monitoring

Lab violations identification methods:

- Observation – EH&S walking the hallway and observing an issue
- EH&S monitoring past due trends and identifying repeat violation patterns
- Responding to a report/tip from someone or responding to an injury or near miss
- Scheduled or non-scheduled inspection
- Logging into Onsite and noting deficiencies chemical inventory management, safety training, or protocols
- External sources such as governmental agencies or vendors

III. Report and Corrective Action Process

All violations must be recorded timely (within 3 business days of completion of the lab inspection) by OEHS staff in Onsite. An email will be sent to the responsible party notifying them that the results of their lab inspection are available for viewing and correction.

Lab inspection deficiencies are ranked by their severity, with a direct correlation to the correction timeline.

1. High Risk deficiencies - may pose an immediate threat to health and safety are required to be corrected within 24 hours (if not immediately).
2. Moderate Risk deficiencies – result in a failure to meet US EPA, RI DEM, OSHA, NFPA, or URI CHP standards are required to be corrected in 7 – 30 days.
3. Low Risk/Other deficiencies – some deficiencies may require infrastructure improvements, purchase of equipment, or assistance from outside vendors. These corrections may require greater than 30 days and will be evaluated on a case-by-case basis.

Notification of Violations

Within 3 business days after the completion of the annual lab safety inspection, the PI and/or Supervisor will receive an email notification that includes a findings summary and a link to access the lab inspection report in Onsite. The report will include the inspection date, any deficiencies identified, recommended corrective action and the correction due date.

Corrective Action Plans

All violations require a corrective action that describes the action taken to resolve the violation, the date that the violation was fully resolved and the name of the individual who

corrected the violation. This information needs to be entered into Onsite to close out each violation. See Attachment C for instructions on how to view and close out lab inspection violations in Onsite Systems.

For violations that require a work order or an outside supporting service provider, the PI or lab manager must fill out a work order https://web.uri.edu/facilities/ for correction. Once a work order number has been created, the PI must forward the number to EHS to acknowledge that the violation is being processed. EHS can provide additional time to correct this violation.

Due Date Extensions

Extensions are granted on a case-by-case basis. Correcting violations are a priority to ensure the health and safety of staff and students, therefore, few extensions will be granted. Contact EHS to discuss further.

Request for due date extensions or variances from the schedule must be approved by the EH&S inspector. Severe violations with EH&S approved due date extensions must have interim action plans to reduce the risk. The deficiency will remain open until fully resolved or the risk sufficiently mitigated.

Closing an Open Violation

The PI will be responsible for documenting the corrective action for each deficiency in the system of record and marking the violation closed.

Refer to Attachment C for detailed instructions on how to view and close out violations. This attachment is also provided here as a pdf or video format: https://web.uri.edu/ehs/laboratory-safety-software/

EH&S staff can also support the responsible individual in closing the violation but the request for assistance should be made at least 3 days in advance of the correction due date.

Action Plan Reminder Notice

The PI will receive an email reminder three days before the due date. The email reminder will include a link to the PI's Onsite Systems dashboard, where they can click on the "Inspections" icon and view and close out violations.

Verification of Action Plan Completion

Within 30 days following closure of all severe deficiencies, EHS will perform a follow-up review to confirm resolution. If the violation is not sufficiently resolved, EHS will reopen the violation, notify the PI/Supervisor, and require corrective action within 3 business days of notification. EHS may follow up on other closed deficiencies as needed.

IV. Achieving High Safety Standards

Department Chairs and Deans are encouraged to recognize PI's who maintain their labs in good standing, timely closure of deficiencies, and strong training completion rates. EHS may provide leaders with supporting documentation of lab compliance and inspection results upon request.

V. Past Due Action Plans

Deficiencies that are not resolved and closed in the reporting system will be subject to a formal escalation process. The following steps will be taken:

Past Due Violations A report of all past due action plans is sent to the PI/Supervisor and Department Chair within 3 days of past due date. This may include individual non-compliance items or all non-compliance issues for the lab.

Past Due Violations Over 30 days A report of all past due action plans aged over 30 days is sent to the PI/Supervisor, Department Chair, AVP Research Administration, and the Dean and applicable college administrators.

Past Due Violations Over 60 days A report of all Severe Risk and Moderate Risk violations past due over 60 days is sent to the PI/Supervisor, Department Chair, AVP Research Administration, the Dean and applicable college administrators, and the VPs for Admin and Finance, Research and Economic Development, and the Executive Vice President for Academic Affairs.

Labs with unresolved Severe Risk and Moderate Risk violations aged over 75 days will be closed until the violation has been resolved or risk reduced to an acceptable level. EHS may engage a third party to remediate the violation and charge the expense to the college.

VI. Trends/Patterns Increasing Risk

EHS will monitor violations and action plan remediation to detect any frequent, repeat, ongoing violations, or negative patterns that increase health and safety risk. Within 3 business days of identification, EHS will record the issue in the system of record, notify individuals accountable for remediation, and set a target action plan completion date. Individual labs with repeat and ongoing violations may be subject to additional training requirements and possible notification to the Department Chair, AVP Research Administration and/or Dean.

VII. Roles and Responsibilities

See Policy on Environmental Health and Safety.

VIII. Remedial Action

Remedial Action may include more frequent inspections, additional safety training and temporary lab closure. If disciplinary action is deemed necessary, it will be determined by the Human Resources Administration and Provost in consultation with the department's Chairperson, Dean, and Research Office Administration.

IX. Record Keeping

OEHS will maintain records of all lab inspections and action plans. These records will be available to PIs, Chairpersons, Deans and other URI administrative staff upon request.

X. Exceptions

None.

Attachments (links to pdf documents)

A. Onsite Systems: Accessing Your Dashboard
B. Adding a worker (lab user) to a PIs permit
C. Reviewing and Closing out Lab Inspections Non-Compliance Issues
D. Self Inspection Checklist for Laboratories

Video Help Guides are available on the EHS Onsite Systems page.