

Audit Scope

 The facility is audited based on Environmental, Health, & Safety written plans, policies, and procedures. A detailed audit checklist is used to ensure each clause of the system is met.

- Audit results are based on:
 - Facility Tour
 - Verification of documents and records
 - Verification of procedures and processes
 - Employee interviews



Housekeeping

- Laboratories
- Offices
- Common Areas
- Building Conditions
- Hallways
- Storage Areas



Audit Summary

EHS Audit Summary		
COMPANY/FACILITIY INFORMATION		
Company/Facility:	Salisbury University	
Location (City, State/Country):	Salisbury, Maryland, USA	
Company Address:	1123 South Divison St, Salisbury, MD, 21801	
Number of Employees:	2013	
Facility Phone #:	410-543-6000	
NAICS #:		
EPA ID # (if applicable):	MDD982703787	
Generator Status:	LQG	
Storm Water # (if applicable):		
Waste Water Permit # (if applicable):		
Air Permit # (if applicable):		
State ID # (if applicable):		
AUDIT INFORMATION		
Lead Auditor:	Morgan Mason CSP, CIT, SSH, MOC, CHMM	
Auditor(s):		
General Manager:		
EHS Representative:	Jillian Townsend, MPH	
Inspection Date(s):	7/26/2023	



Executive Summary

- The facility has approximately +2000 employees
- Current large projects/initiatives include: N/A

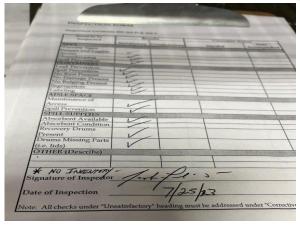




Areas of Compliance & Strength

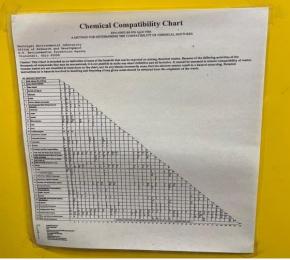








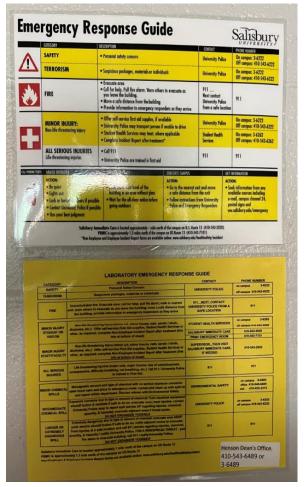








Areas of Compliance & Strength











Best Practice - EHS

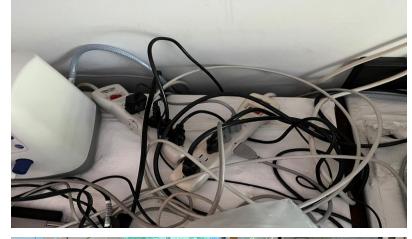












































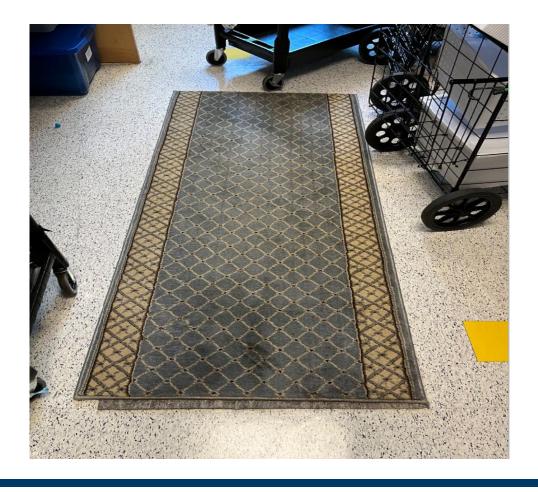


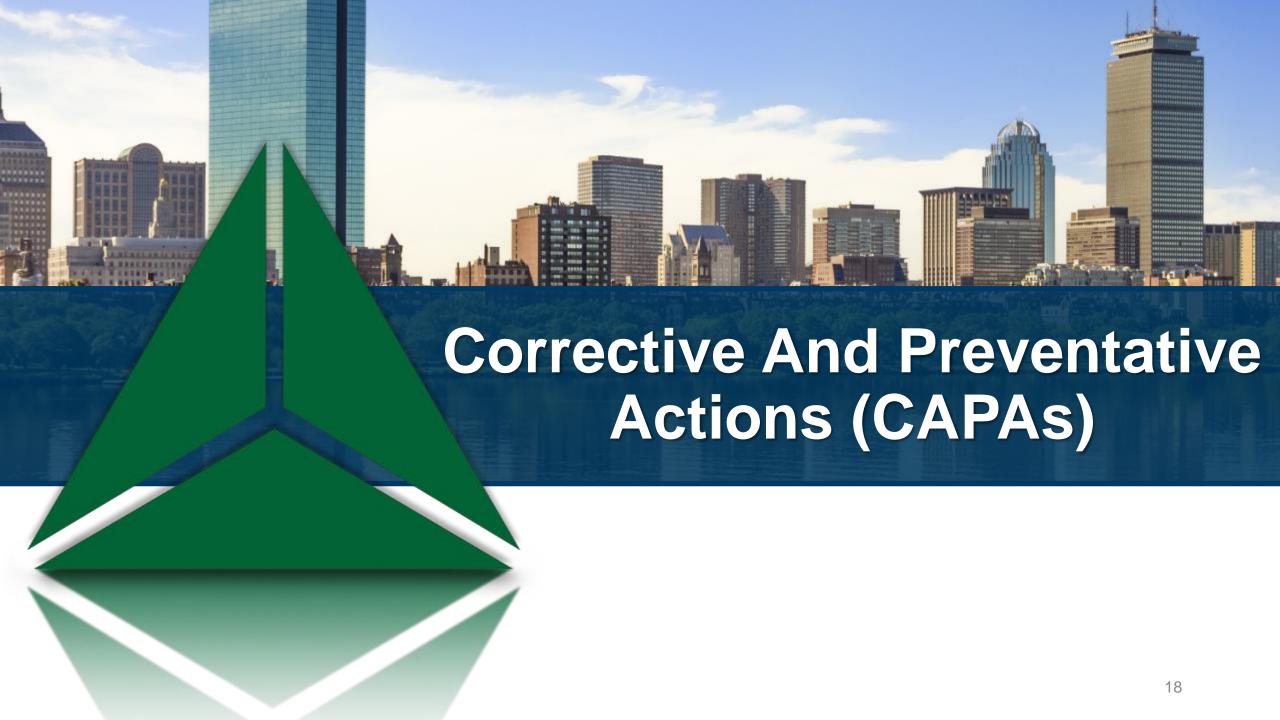












- CAPA #: 20230726-TEICAPA-SU-001
- Regulation:
 - 29 CFR 1910.1200(f)(6)(ii) Workplace labeling: ...the employer shall ensure that each container of hazardous chemicals in the work place is labeled, tagged, or marked with either:
 - (ii) "Product identifier and words, pictures, symbols, or combination thereof, which provide at least general information regarding the hazards of the chemicals, and which, in conjunction with the other information immediately available to employees under the hazard communication program, will provide employees with the specific information regarding the physical and health hazards of the hazardous chemical."
- **Finding**: Several examples of hazardous materials not being labeled correctly. Missing labels, missing hazard characteristics, chemical formula being used in place of name, unknown chemicals, etc.
- Recommendation: Ensure personnel undergo adequate training (OSHA's HAZCOM Standard (1910.1200)). Also, provide secondary container labels for all hazardous chemicals (best practice: all chemicals).

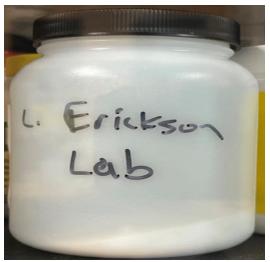






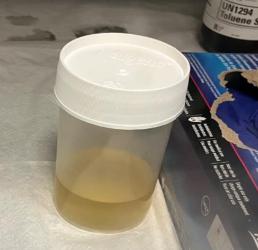














- **CAPA #: 20230726**-TEICAPA-SU-002
- Regulation:
 - 29 CFR 1910.303(b)(2)
 - "Installation and use. Listed or labeled equipment shall be installed and used in accordance with any instructions included in the listing or labeling."
- Finding: Relocatable Power Taps (aka: power strip/surge protector, etc.) are "daisy-chained" (one power strip is plugged into another power strip). This violates the UL listing and poses a possible electrical/fire hazard.
- Recommendation: Un-plug power strip and plug into appropriate wall outlet.









- CAPA #: 20230726-TEICAPA-SU-003
- Regulation:
 - 29 CFR 1910.106(e)(2)(b)(1)
 - The quantity…located outside of a … storage cabinet in a building or in any one fire area of a building shall not exceed: (25)-gallons of (OSHA) Category 1 flammable liquids in containers.
- **Finding**: Category 1 Flammable liquids reaching near and/or slightly exceeding allowed quantity outside of flammable cabinet in certain areas.
- Recommendation: Limit storage of flammable chemicals outside a flammable cabinet. If possible, obtain more flammable cabinets of varying sizes; chemical inventory/reduction could also assist.







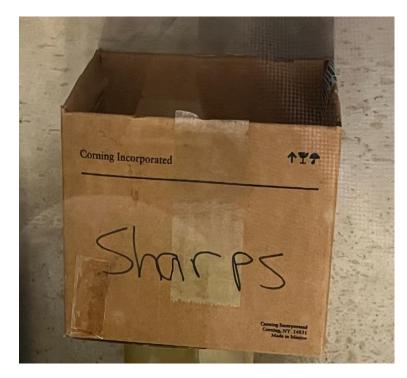


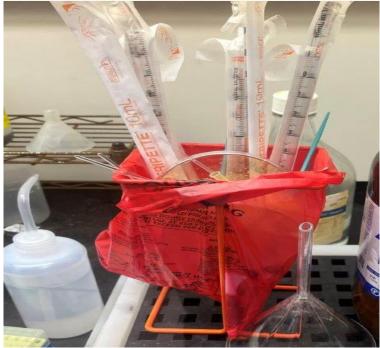


- CAPA #: 20230726-TEICAPA-SU-004
- Regulation:
 - 29 CFR 1910.1030(d)(4)(iii)(A)(1)(i-iv)
 - "Contaminated sharps shall be discarded immediately or as soon as feasible in containers that are: closable, puncture resistant, leakproof on sides and bottom, and labeled or color coded..."
- **Finding**: Inadequate containers are being used as sharps waste containers. These containers do not meet the OSHA definition of a "sharps container".
- Recommendation: Purchase appropriately sized sharps containers

 ensure that they are able to fit the size of the sharps they are holding (not protruding out)











- CAPA #: 20230726-TEICAPA-SU-005
- Regulation:
 - 29 CFR 1910.1200(e)(1)(i) Written Hazardous Communication Program to include the following:
 - (i) "A list of the hazardous chemicals known to be present using a product identifier that is referenced on the appropriate safety data sheet (the list may be compiled for the workplace as a whole or for individual work areas)"...
- **Finding**: Some chemicals have expired since the late 80's/90's. An adequate, upto-date chemical inventory for each laboratory should be established, including each hazardous chemical's Safety Data Sheet.
- Recommendation: Remove all expired chemicals and update hazardous chemical inventory for each laboratory. Obtain applicable Safety Data Sheets. Ensure employees receive adequate training on OSHA's Hazardous Communication and Salisbury University's Written Hazard Communication Program.



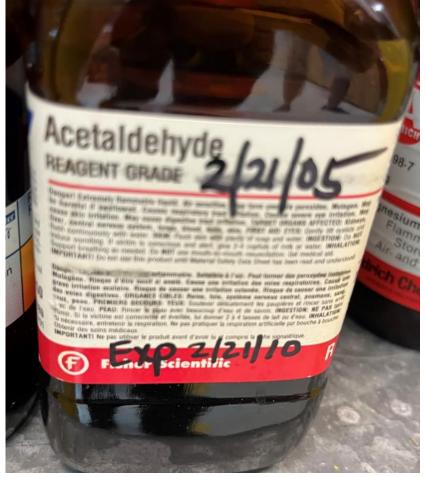














- **CAPA #: 20230726**-TEICAPA-SU-006
- Regulation:
 - 29 CFR 1910.334(a)(3)(i)
 - "A flexible cord (extension cord) used with grounding-type equipment shall contain an equipment grounding conductor"
- Finding: Extension cord(s) missing grounding prong. Potential electrical/fire hazard.
- Recommendation: Replace/Repair extension cord and ensure grounding prong is in place.







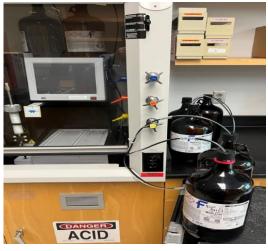


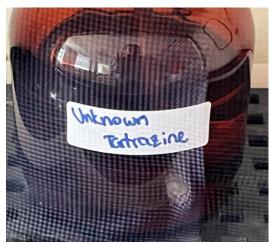
- CAPA #: 20230726-TEICAPA-SU-007
- Regulation:
 - 40 CFR 262.15(a)(4)
 - "A container holding hazardous waste must be closed at all times during accumulation"
 - 40 CFR 262.15(a)(5)(i-ii)
 - "A generator must mark or label its container with the following: (i) the words 'Hazardous Waste' and (ii) an indication of the hazards of the contents (ignitable, corrosive, reactive, toxic, etc.)..."
 - 40 CFR 262.17(a)
 - "A large quantity generator accumulates hazardous waste on-site for no more than 90-days..."
- **Finding**: Systemic issues regarding a Hazardous Waste System. Container Labeling, Storage, Accumulation Start Dates, Exceedance of Storage Time-Limits (90 days), Unknown Wastes, Open Waste Containers, etc.
- Recommendation: Ensure all HazMat Employees (per DOT 49 CFR 171.8) are adequately trained. Suggest RCRA annually (40 CFR 265.16(b)) and HazMat "General Awareness" Training every (3) years (DOT 49 CFR 172.704(c)(2)) for all HazMat Employees. Mark all hazardous waste appropriately as described above. Ensure Accumulation start date of hazardous waste begins when it enters Central Accumulation Area. Have Waste Transportation company pick up waste from Central Accumulation Area at least once per quarter to ensure not to exceed 90-day accumulation timeframe.

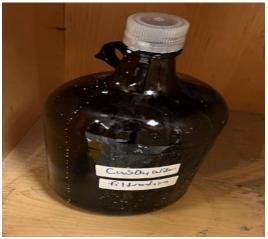


















- CAPA #: 20230726-TEICAPA-SU-008
- Regulation:
 - 29 CFR 1910.147(c)(4)
 - "Procedures shall be developed, documented and utilized for the control of potentially hazardous energy when employees are engaged in the activities covered by this section..."
 - 29 CFR 1910.147(c)(6)(i)
 - "The employer shall conduct a periodic inspection of the energy control procedure at least annually to ensure that the procedure and the requirements of this standard are being followed."
- **Finding**: No finding of LOTO procedures. Procedures not reviewed annually. Periodic Inspections not being performed.
- Recommendation: Ensure adequate training of all affected personnel both Authorized and Affected employees. Work with Maintenance and other appropriate staff to write SOP's and LOTO procedures. Review program/procedure on annual basis. Perform Periodic Inspection at least annually.



Photo(s) not available. Procedural/Document finding.





Observations & Recommendations

- Observation #: 20230726-TEIOBS-SU-001
 - **Finding**: Eyewash/Shower stations inspection only being performed annually. Suggest more frequent inspections if feasible.
- Observation #: 20230726-TEIOBS-SU-002
 - **Finding**: (2) Gas cylinders found not to be secured. Suggest to secure/tether.
- Observation #: 20230726-TEIOBS-SU-003
 - **Finding**: Potential Electrical shock/exposed wiring. Suggest to have qualified personnel (staff/contractor/electrician) to cover exposed wires to prevent exposure.
- Observation #: 20230726-TEIOBS-SU-004
 - **Finding**: (1) Fire extinguisher found not to be mounted (OSHA 29 CFR 1910.157(c)(1)).



20230726-TEIOBS-SU 001-004 Photos



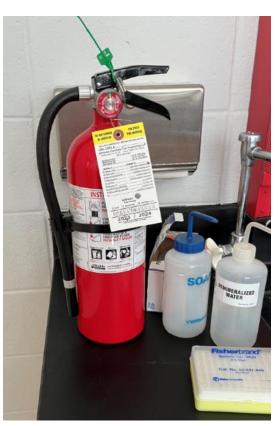
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20230726-TEIOBS-SU-003 20230726-TEIOBS-SU-004





Observations & Recommendations

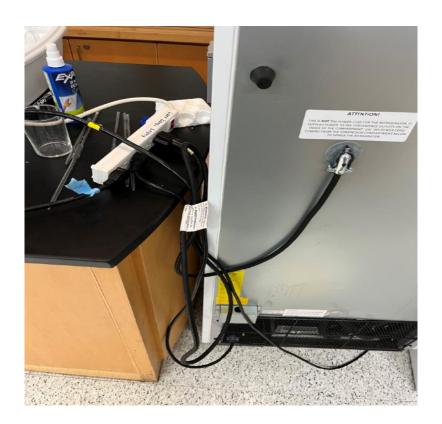
- Observation #: 20230726-TEIOBS-SU-005
 - Finding: Informed on tour by staff that wall-mounted equipment contains mercury. If improperly used (unscrewed at bottom) mercury will spill onto floor and students/employees could potentially be exposed to hazard. Suggest safety mechanism if or absolute removal.
- Observation #: 20230726-TEIOBS-SU-006
 - **Finding**: Refrigerator is plugged into Relocatable Power Tap (Power Strip/Surge Protector). The machine pulls a lot of electricity. Suggest to plug directly into wall outlet to prevent overload.
- Observation #: 20230726-TEIOBS-SU-007
 - **Finding**: Chemicals are not being segregated appropriately one instance found segregated by alphabetical order; another instance flammables and corrosives were stored together. Suggest to segregate by hazard class and compatibility.



20230726-TEIOBS-SU 005-006 Photos



20230726-TEIOBS-SU-005



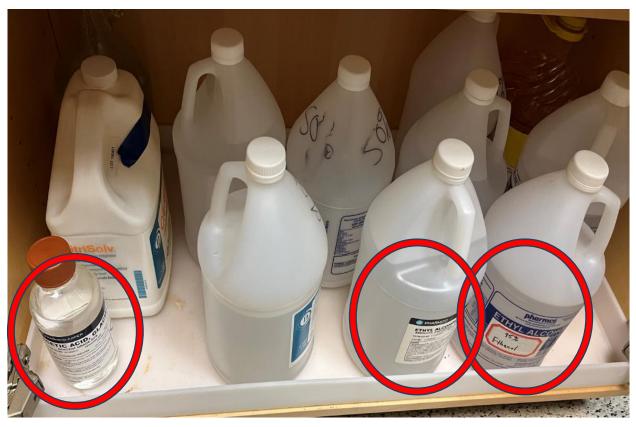
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20230726-TEIOBS-SU 007 Photos







20230726-TEIOBS-SU-007

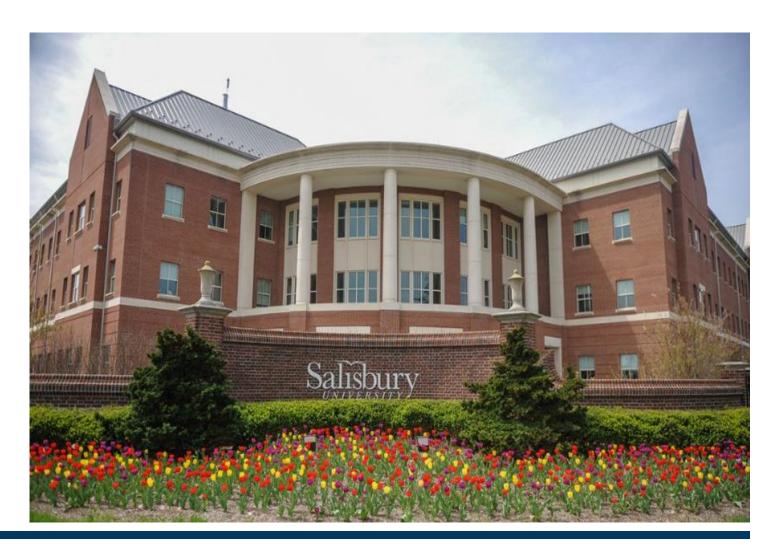




Audit Result

- Tier IV (of IV!!)
- The system is fully implemented with a high level of management control. Management is focusing on sustaining a continuous improvement culture and environment

Audit Results		
OVERALL TIER SCORE	Tier IV	91%





Post Audit

- Jillian Townsend is designated as the investigation leader(s).
 - Use RCA (Root-Cause-Analysis) for each CAPA to investigate each finding.
 - Determine actions that will eliminate the Root Cause and prevent future recurrence.
 - Notify Lead Auditor Morgan Mason for review and/or questions



Continual Improvement

 This Audit is part of a Continual Improvement Cycle and is recommended to recur at least annually.



