

FY23 SHERM Metrics-Based Performance Summary

Key Performance Indicators for Safety, Health, Environment & Risk Management (SHERM):
Losses, Compliance, Finances, and Client Satisfaction



UTHealth Houston Institutional Missions and SHERM's Role, Contributions

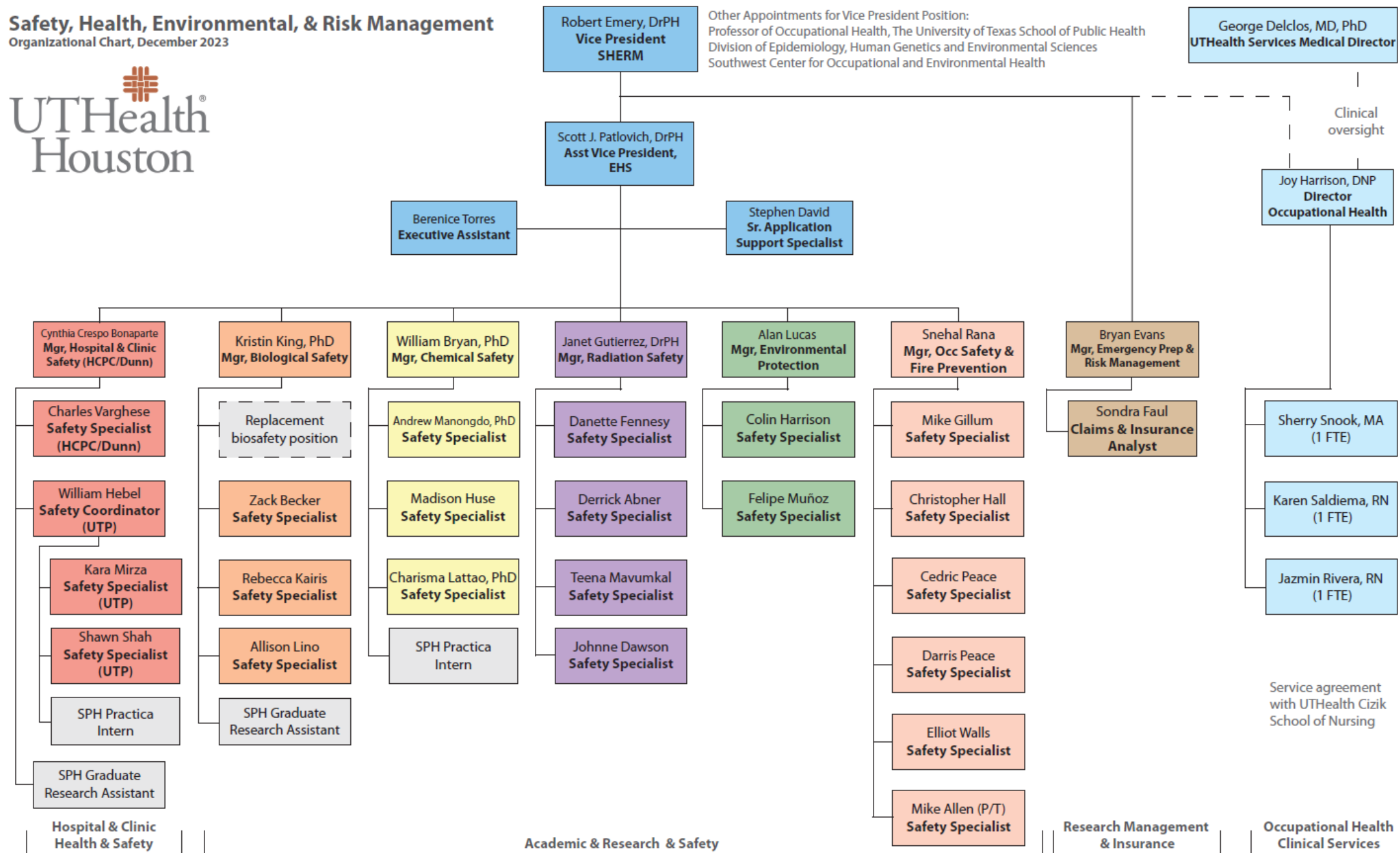
UTHealth Houston institutional missions:

- Teaching
- Research
- Service
 - Service to the Institution (SHERM's primary role)
 - 4 Key Performance Indicators (KPI) of safety services provided
 - Service to the Community

SHERM contributes to the other key institutional missions as well

Safety, Health, Environmental, & Risk Management

Organizational Chart, December 2023



Other Appointments for Vice President Position:
Professor of Occupational Health, The University of Texas School of Public Health
Division of Epidemiology, Human Genetics and Environmental Sciences
Southwest Center for Occupational and Environmental Health

George Delclos, MD, PhD
UTHealth Services Medical Director

Clinical oversight

Joy Harrison, DNP
Director
Occupational Health

Sherry Snook, MA
(1 FTE)

Karen Saldiema, RN
(1 FTE)

Jazmin Rivera, RN
(1 FTE)

Service agreement
with UTHealth Cizik
School of Nursing

Hospital & Clinic
Health & Safety

Academic & Research & Safety

Research Management
& Insurance

Occupational Health
Clinical Services

Important Prologue: Ongoing Impacts of COVID-19

The COVID-19 pandemic declaration was discontinued in FY23, **but the disease remains endemic**. Departmental operations and services continue to be focused on addressing ongoing needs to keep people healthy and safe on our campus during endemic COVID-19.

- Many services continue to be dramatically increased (e.g. respiratory protection program)
- Most other SHERM operations and services have returned to “normal”

As essential personnel, **SHERM staff have remained physically on campus** during the entirety of FY23 to serve the institution.

A “COVID-19 Hotwash” event, with representation from departments and administrative units across campus, was held in May 2023 to **debrief on the pandemic event, review lessons learned, and ensure preparedness** for future infectious disease outbreaks at UTHealth Houston.

SHERM's Four Key Performance Indicators (KPI) for Safety Services to the Institution

KPI #1 Losses

Personnel
Property

KPI #2 Compliance

With external agencies
With internal assessments

KPI #3 Finances

Expenditures
Revenues

KPI #4 Client Satisfaction

External clients served
Internal department staff

KPI #1: Losses

Personnel

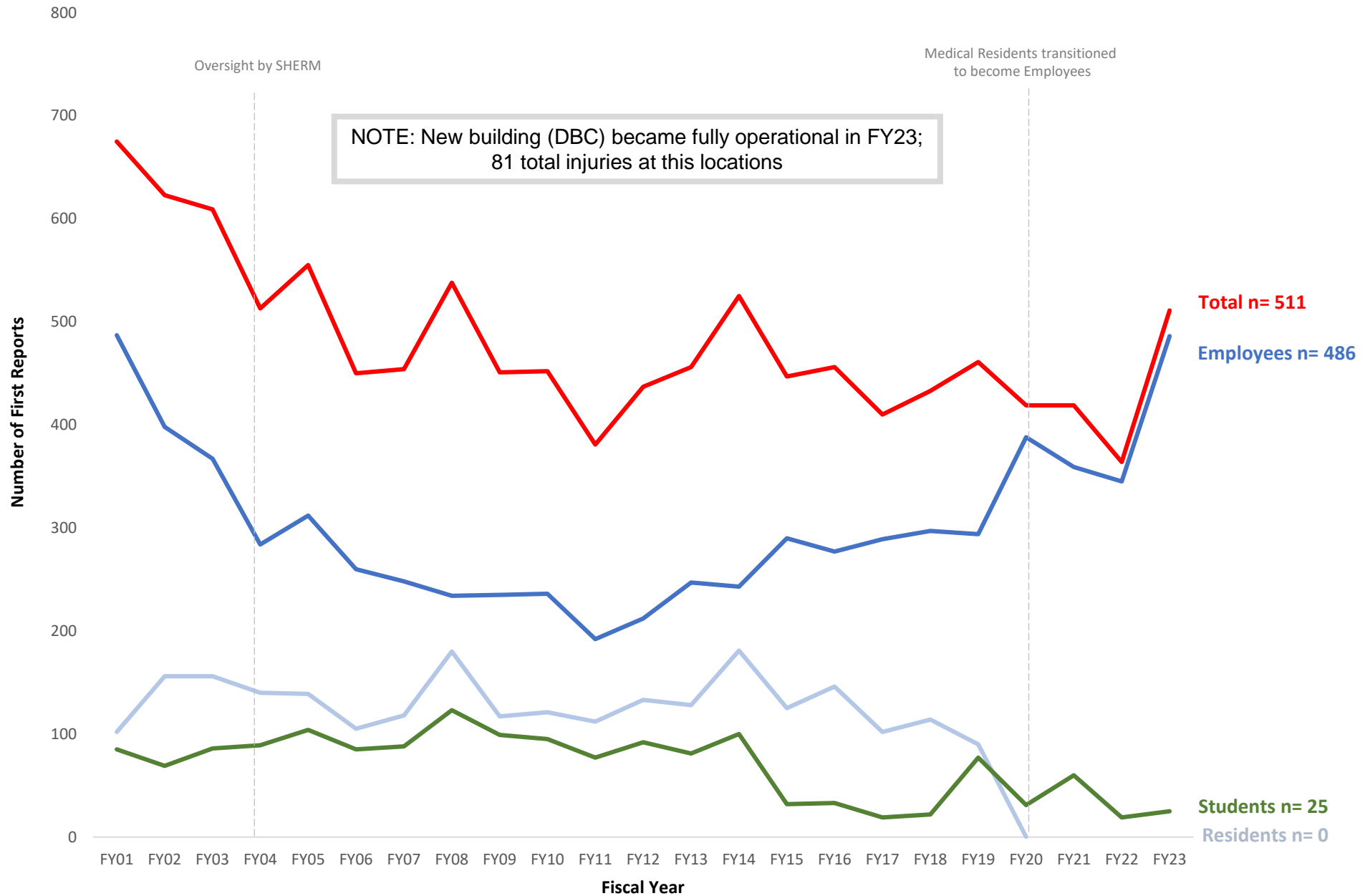
- Numbers of first reports of injury submitted by employees, residents, students
- Number of reported employee injuries and illnesses requiring medical treatment
- Workers' Compensation Insurance experience modifier

Property

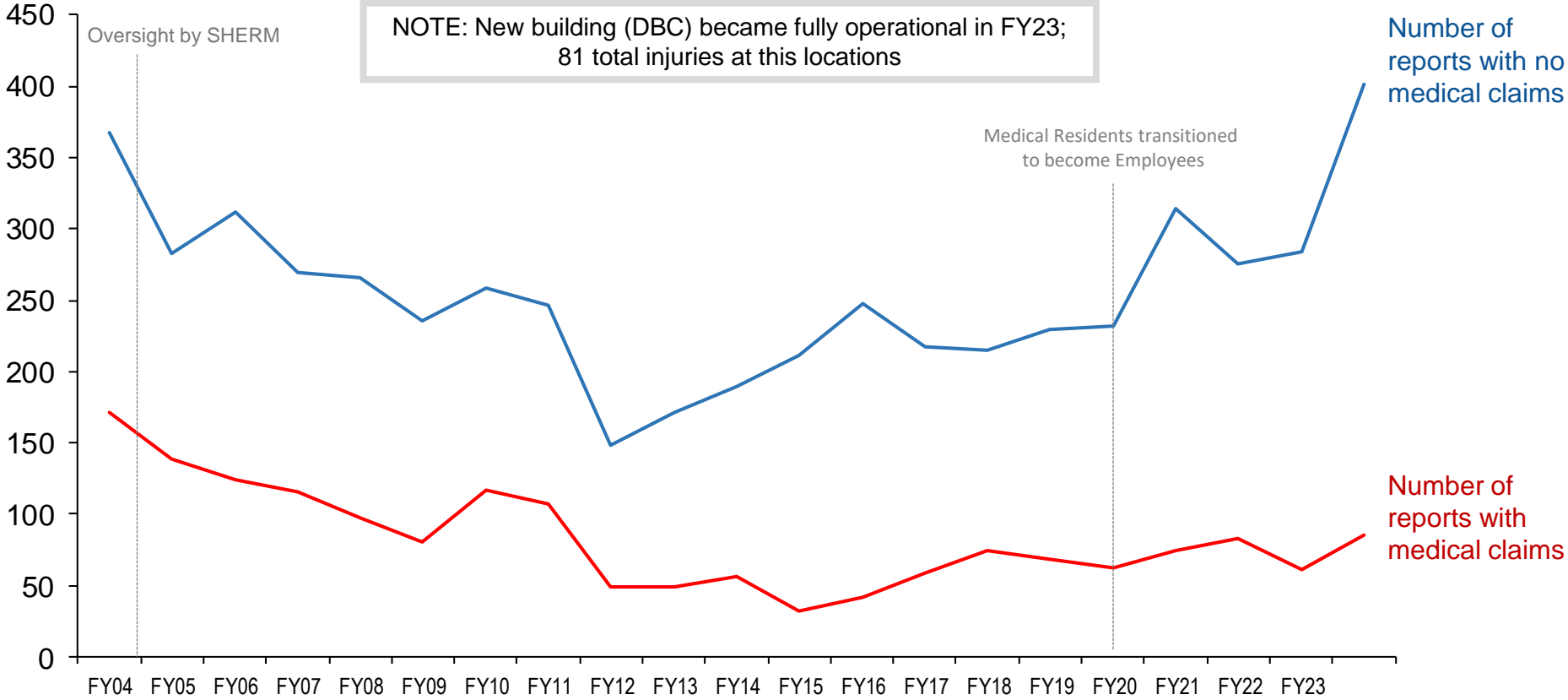
- Losses incurred and covered by UTS Comprehensive Property Protection Program
- Losses incurred but covered by outside party
- Losses retained by UTHealth Houston

Number of First Reports of Injury, by Population Type, FY01 – FY23

(estimated total population = 16,806; employees: 11,487; students: 5,319)



Total Number of Employee First Reports of Injury and Subset of Compensable Claims Submitted to UT System, FY03 to FY23

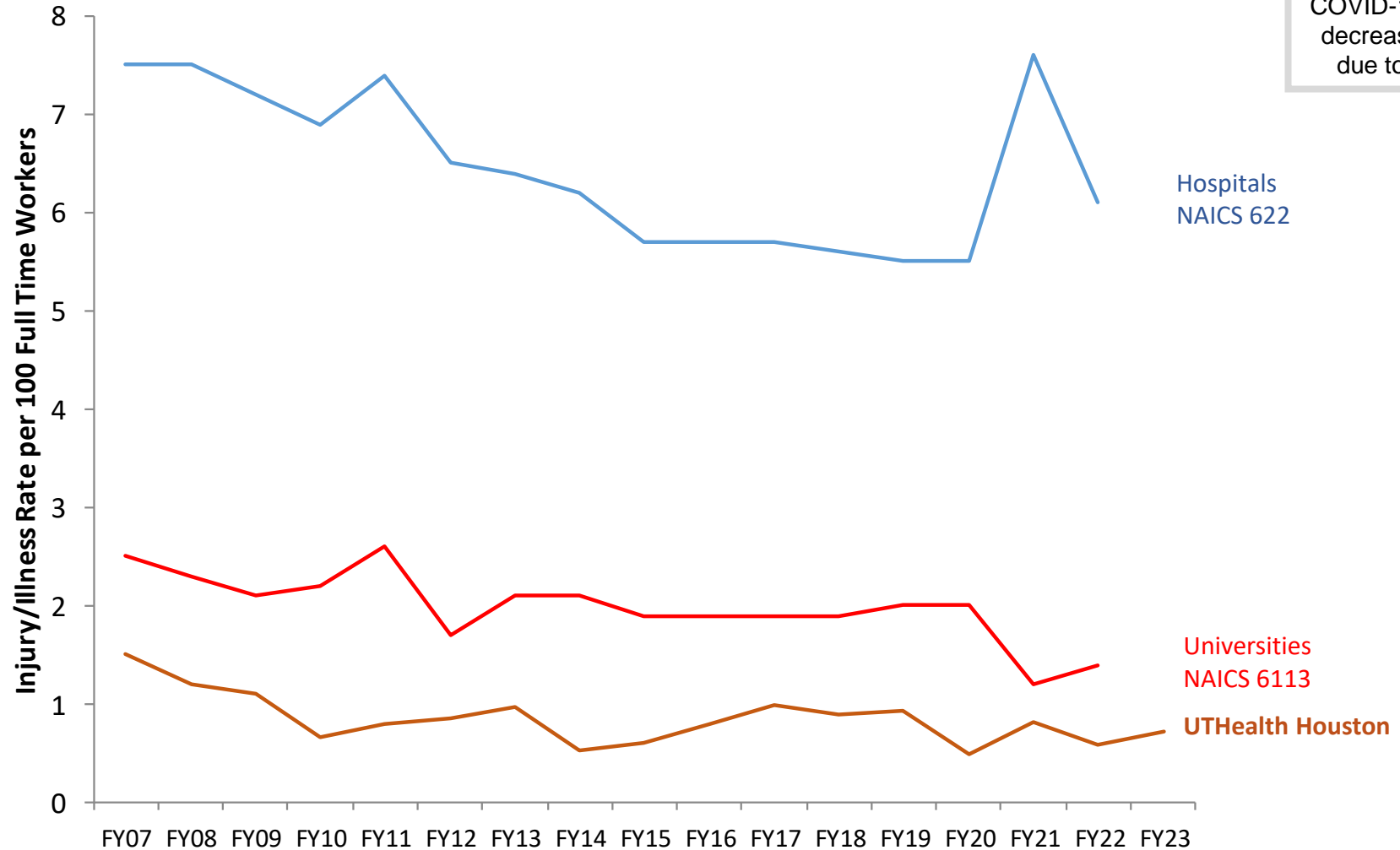


*Opening of new DBC building and increase in UTP clinics has resulted in greater risk of injury due to higher clinical injury exposures

Annual UTHealth Houston Incidence Rate of Reported Employee Injuries and Illnesses Compared to National Hospital and University Rates

(national data source: US Bureau of Labor Statistics)

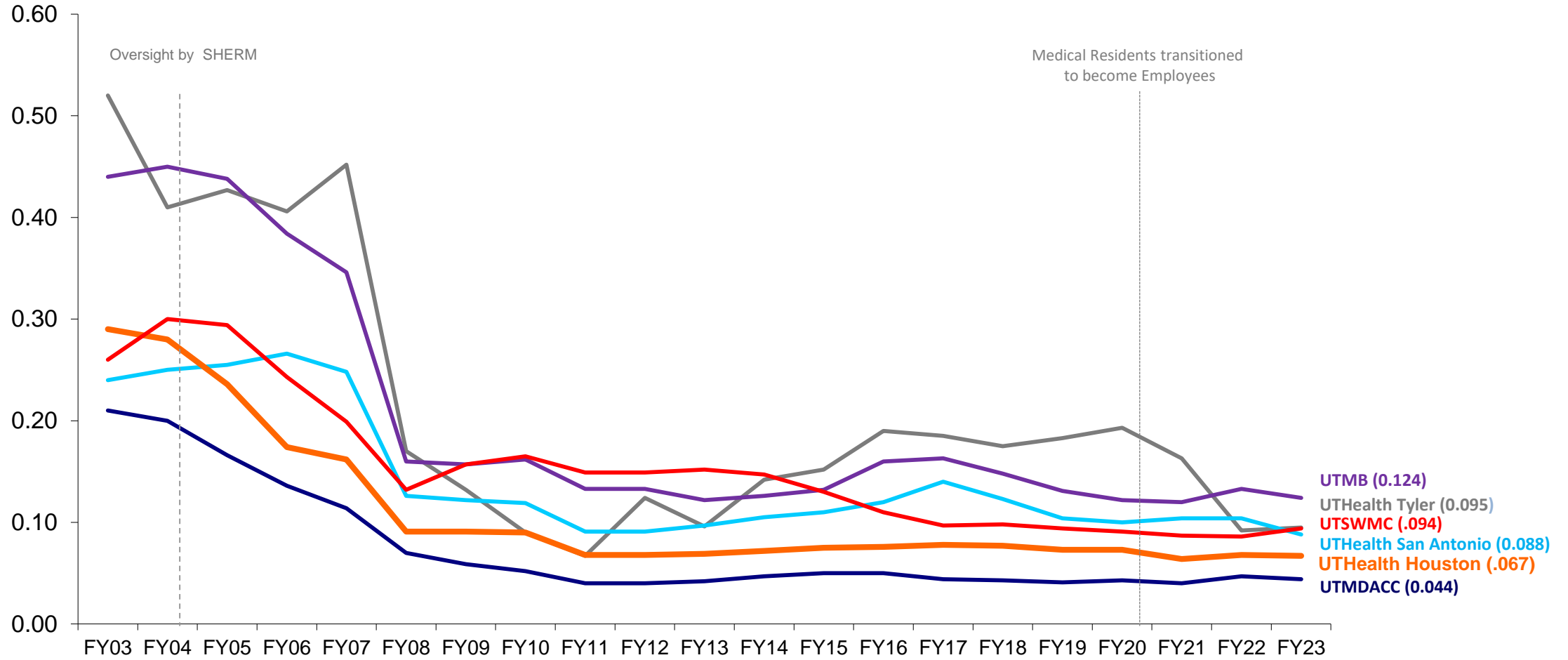
Annual Reported Injury/Illness Rates



NOTE: National data for FY21 reflects impacts of COVID-19 on hospitals and decreases on universities due to remote learning

Workers' Compensation Insurance Premium Experience Modifier for UT System Health Institutions, FY03 to FY23

(premium rating based on a three year rolling average as compared to a baseline of 1.00)



Fiscal Year

FY23 Retained Property Losses

▪ **Notable Retained Losses (inclusive of insurance deductibles)**

Type	Location	Date	Cost
Water	UTPB	9/2022	\$28,034
Water	MSB	12/2022	\$13,020
Water	HCPC	12/2022	\$1,500
Water	UTPB	1/2023	\$1,500
Auto	MSB	4/2023	\$1,000
Water	DCB	5/2023	\$55,777
Water	MSB	6/2023	\$116,897
Water	MSE	6/2023	\$1,000
Water	UTPB	7/2023	\$174,336
Water	IMM	8/2023	\$1,500
Fire	Housing	8/2023	\$2,000
TOTAL			\$426,314

▪ **Losses incurred and covered by third party**

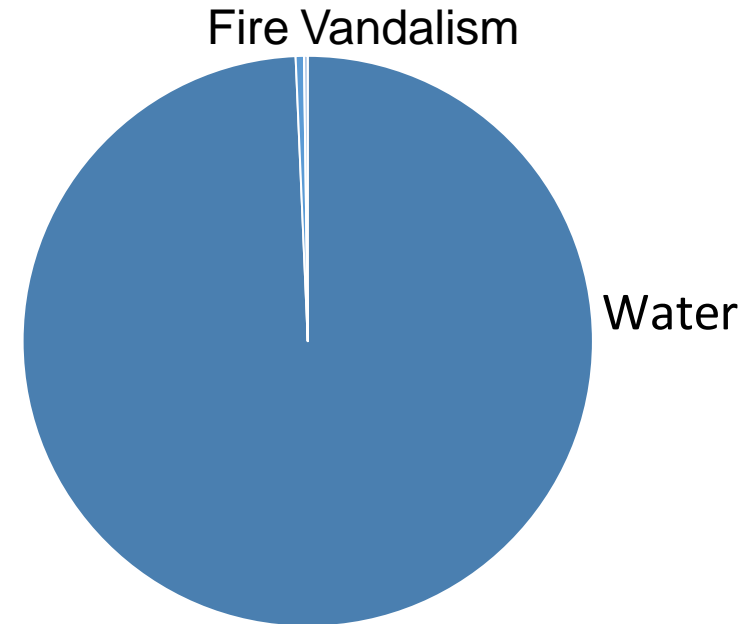
- Auto-----9/2022 \$17,283
- Auto-----1/2023 \$21,706
- Water-----6/2023 \$2,000
- Auto-----7/2023 \$1,510
- Water-----7/2023 \$2,000

▪ **Losses incurred and covered by UTS insurance**

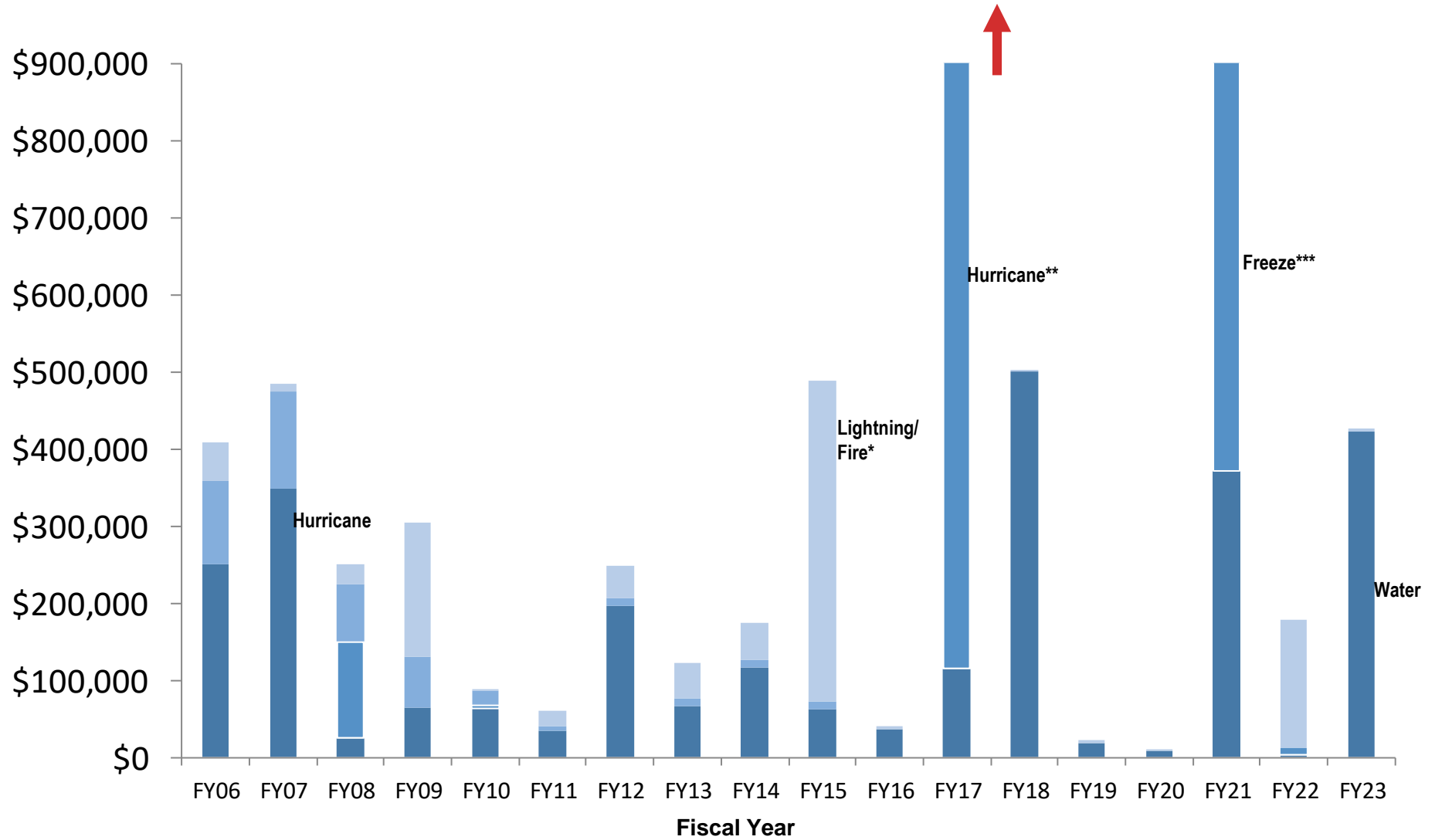
- Auto-----5/2023 \$2,000

Retained Loss Cost Summary by Peril

(Total FY23 retained losses = \$426,314)



UTHealth Houston Total Property Retained Loss Summary by Peril and Value, FY06 to FY22



*FY15 – Lightning strike caused fire damage at student housing totaling \$978K loss, with retained loss total at \$417K
 **FY17 – Hurricane Harvey losses totaling \$12.6M, with retained loss total estimated at \$4.8M
 ***FY21 – Winter Storm Uri impacted all UT System institutions across the State of Texas

FY24 Planned Actions - Losses

Personnel

- Closely monitor increase in reported employee injury events (largely from the clinic setting) and implement preventive measures with special consideration for the new Dunn Behavioral Sciences facility
 - New multidisciplinary committee established at HCPC/Dunn to address patient/employee and patient/patient aggression and associated injuries
- Re-evaluate slip, trip, and fall data to focus on particular trends and locations; provide interventions to prevent recurrence where possible
- Continue to focus on sharps injury and bloodborne pathogens exposure prevention, especially with post-exposure prophylaxis costs continuing to increase and changed coverage for medical residents in FY21 impacting ability to reimburse for these costs (e.g. increase in retained losses)

Property

- Re-emphasize focus on prevention and effective management of property insurance claims given recent increase in deductible from \$250K to \$500K per occurrence
- Continue with successful efforts to educate faculty and staff about common perils causing losses (water, power interruption, and theft), simple interventions
- Develop additional predictive methods for prompt recovery after losses occur, specifically estimated length of time to recovery

KPI #2: Compliance

With external agencies

- Regulatory inspections; other compliance related inspections by outside entities

With internal assessments

- Results of EH&S routine safety surveillance activities

External Agencies Inspections

n= 8

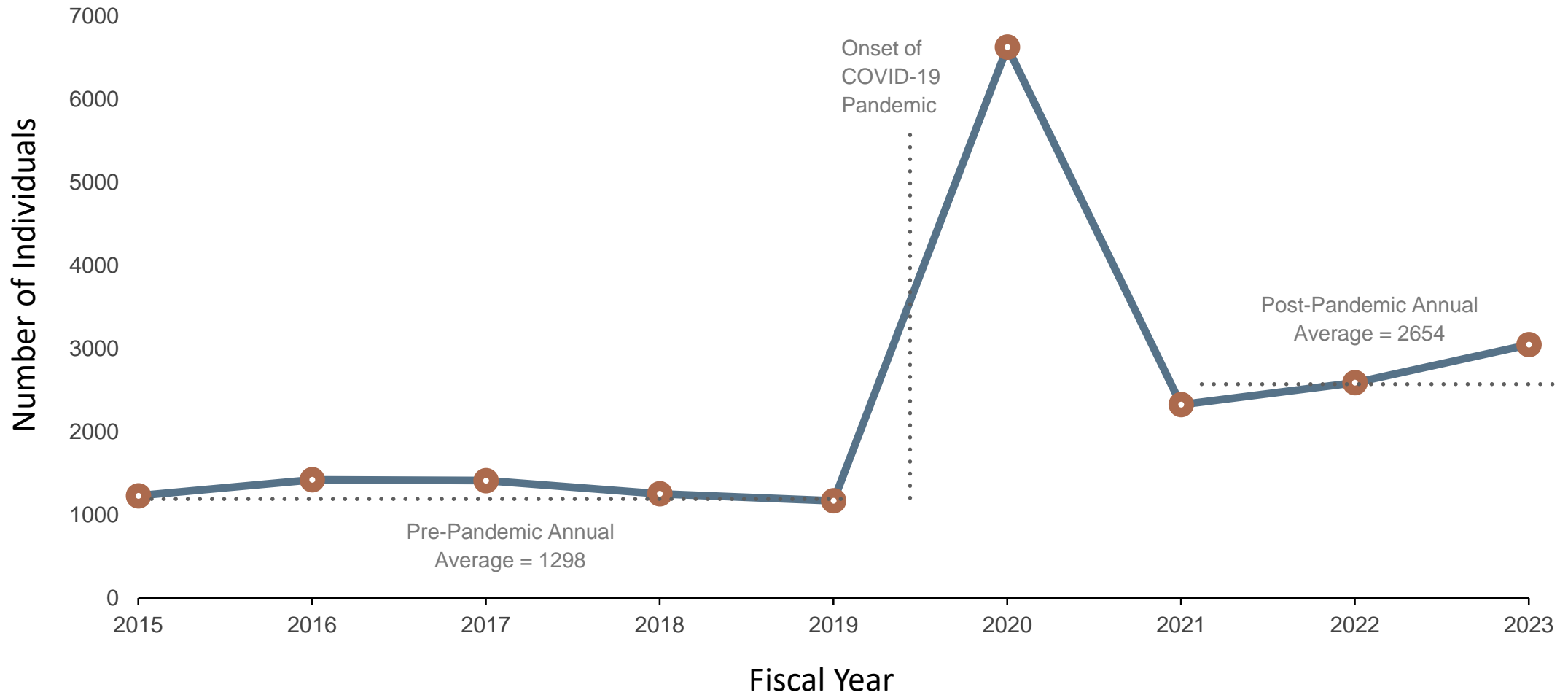
	Date	Agency	Findings	Status
1	February 2, 2023	Texas Department of State Health Services Radiation Control	No items of non-compliance (UTHealth Houston, School of Dentistry, SOD Building, X-ray R10908, Site 009)	Inspection file closed
2	April 4, 2023	Texas Department of State Health Services Radiation Control	No items of non-compliance (Reciprocity C&C Irradiator/UTHealth Houston, Shipment of Device, RAM L02774, Site 000)	Inspection file closed
3	April 7, 2023	Texas Department of State Health Services Environment of Care	Site visit at HCPC/Dunn related to submitted complaints regarding mold contamination in building. No items of non-compliance.	Inspection file closed
4	May 22, 2023	Texas Department of State Health Services Radiation Control	No items of non-compliance (UTHealth Houston, South East Neuroscience Spine Center, Astoria Blvd, X-ray R10908, Site 028)	Inspection file closed
5	July 11, 2023	Texas Department of State Health Services Radiation Control	No items of non-compliance (UT Physicians, Pedi Plastic Surgery, 6410 Fannin St, Suite 1400, X-ray R26367, Site 042)	Inspection file closed
6	July 11, 2023	Texas Department of State Health Services Radiation Control	No items of non-compliance (UT Physicians, Plastic Surgery, 6410 Fannin St, Suite 950, X-ray R26367, Site 044)	Inspection file closed
7	August 8, 2023	Texas Department of State Health Services Radiation Control	No items of non-compliance (UTHealth Houston, BBSB Building, East Rd, X-ray R10908, Site 023)	Inspection file closed
8	August 21, 2023	Texas Department of State Health Services Environment of Care	Site visit at HCPC/Dunn related to submitted complaints regarding mold contamination in building. No items of non-compliance.	Inspection file closed

Routine Internal Compliance Assessments

5,056 workplace assessments completed and documented

- Progression of routine surveillance program emphasis: labs, clinics, building fire systems, mechanical and non-lab spaces
- 1,787 deficiencies identified (70% in non-lab spaces)
 - 747 of these deficiencies now corrected to date
 - EHS will continue to focus on assisting with correction of remaining deficiencies
 - Working with FPE to track and report progress and reporting progress to appropriate safety committees
- 11,601 individuals provided with required safety training
 - 3,047 individuals trained and fit tested for respiratory protection (more than 2X pre-COVID-19 conditions)
 - Clinical based students (e.g. McGovern Medical School, Cizik School of Nursing, School of Dentistry) provided with COVID-19 awareness and PPE training
 - Continued increase in participation in online safety training modules (primarily refresher lab and clinic safety training)
 - Students accessing online safety training content in lieu of in-person training
 - As a result of software upgrades, there is now improved reporting of online safety training between EHS Assistant and HR Learning Management System (iLearn)
- 91% of PIs have submitted chemical inventories for recording in SHERM database

Respiratory Fit Testing Demands Addressed by EHS at UTHealth Houston, by Fiscal Year



Non-Routine Internal Compliance Activities

- SHERM led projects to safely, securely, and compliantly **remove two “A-Level” compliance risks** from the institution in FY23:
 - Laboratory decommissioning and entity withdrawal from the Federal Select Agent Program
 - Decommissioning and removal of second (and final) Cesium device on campus through participation in the National Nuclear Security Administration’s CIRP program
- SHERM created a safety and health awareness training module for **inclusion in the campus-wide annual compliance training**
- A **records retention project** was completed to scan and electronically store SHERM records in a safe and secure manner according to the institution’s records retention policy; resulted in freed up storage space in EHS offices
- Plan reviews, code compliance, and safety oversight for construction completion and opening of the new **TMC3 Collaborative Building**; design scope planning and ground breaking for **new PHERB building** project

FY24 Planned Actions - Compliance

External compliance

- Continue to educate and prepare UTHealth Houston & UTPhysicians clinics about State of Texas Radiation Control program who continue to conduct frequent unannounced x-ray inspections
- Participate in the triennial AAALAC-International re-accreditation site visit scheduled for Fall 2023
- Prepare for expected campus visits from State of Texas Fire Marshal Office due to revitalized inspection program post-COVID-19

Internal compliance

- Develop efficiencies and strategy for long term management of respiratory protection program since demand remains high
- Continue aggressive routine surveillance program and incorporate lessons learned from deficiency data into safety training to prevent recurrence
- Focus on succession planning for specialty positions in SHERM due to anticipated transitions in future
- Focus on education of research and clinic personnel regarding controlled substances used and stored at UTHealth Houston and UTP
- Continue to work with FPE to systematically address identified deficiencies and support current projects to address fire safety considerations
 - Provide regular updates to appropriate safety committees
- Continue emphasis on lab inventories of hazardous materials
 - Continued improvement of chemical inventories
 - Support biosafety awareness and inventory of biological agents and toxins within UTHealth Houston laboratories
 - Focus on controlled substances storage, security, and inventory management and documentation through routine survey process within labs and research units on campus

KPI #3: Finances

Expenditures

- Program cost, cost drivers

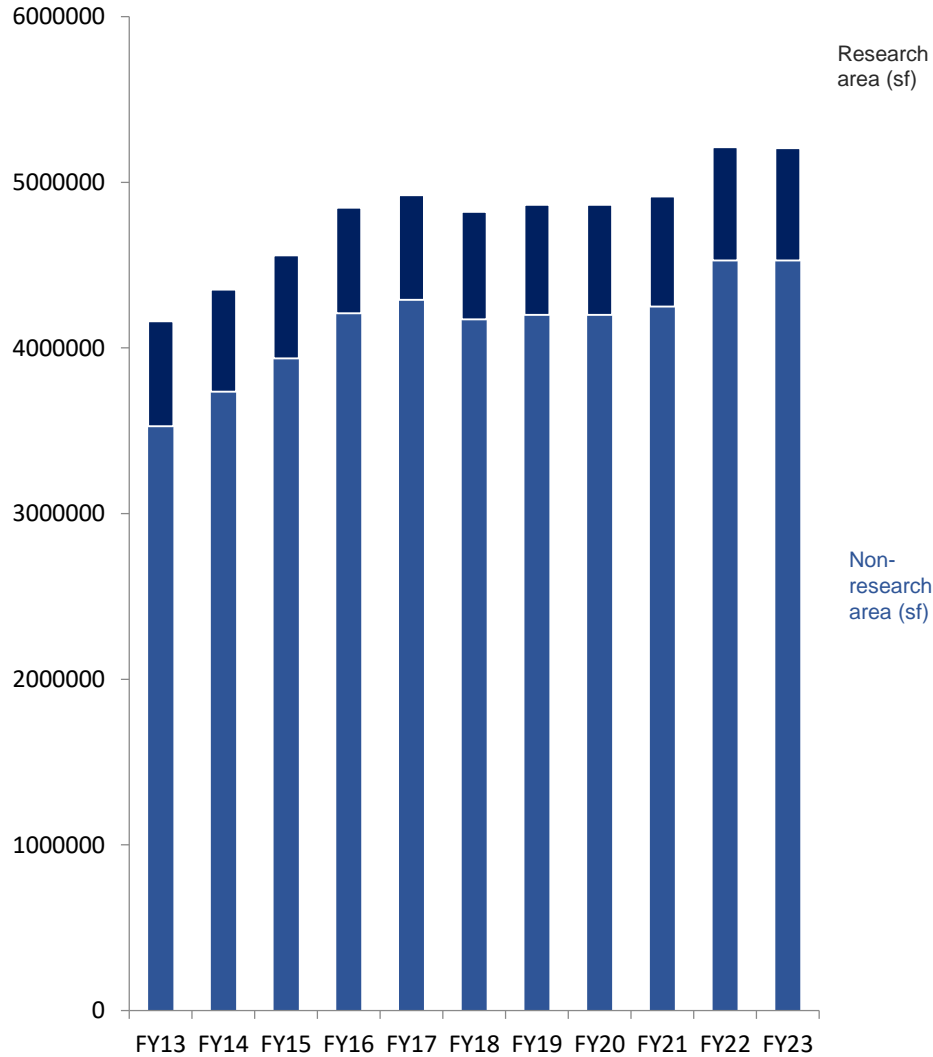
Revenues

- Sources of revenue, amounts

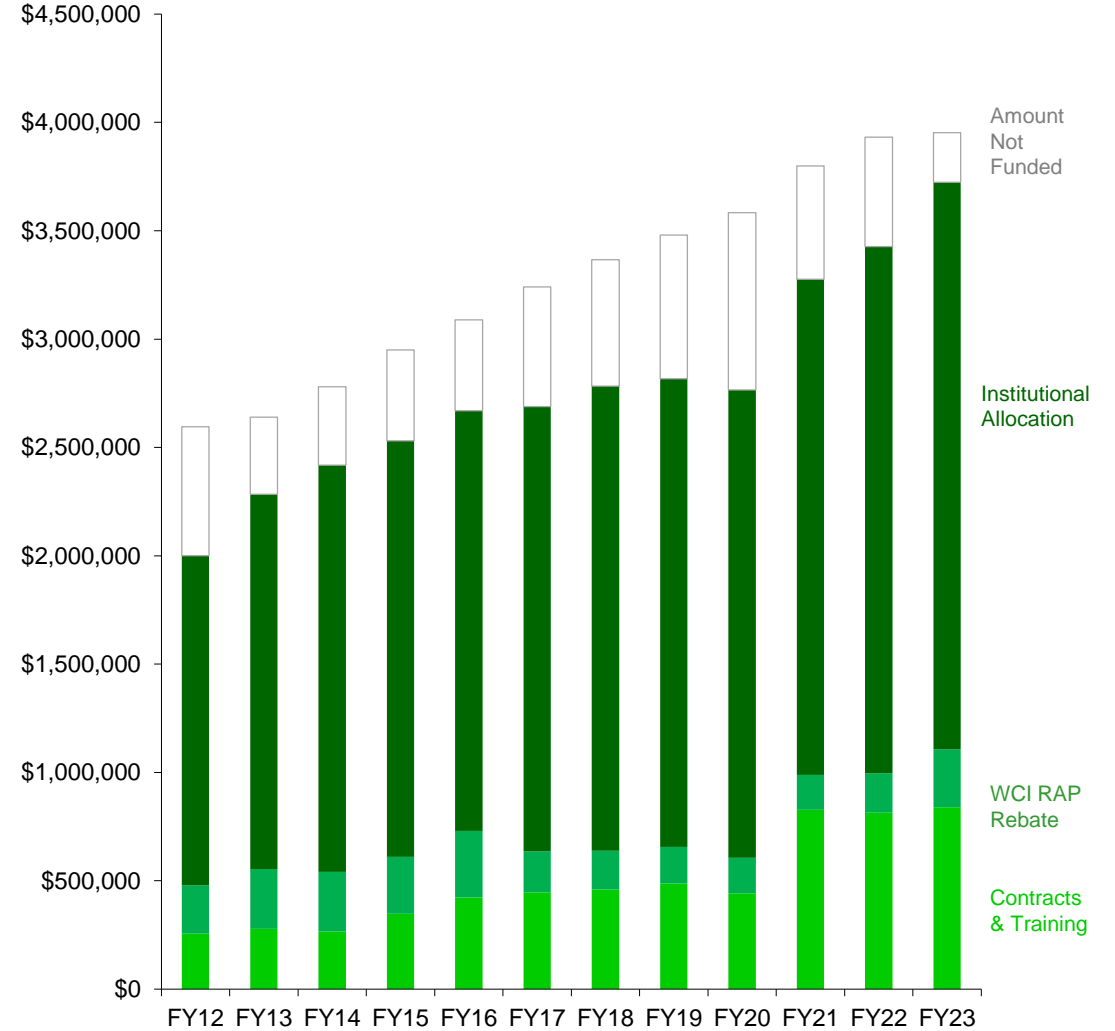
Campus Square Footage, SHERM Resource Needs and Funding

(modeling not inclusive of resources provided for, or necessary for Employee Occupational Health Program)

Total Assignable Square Footage and Research Subset



Modeled SHERM Resource Needs and Institutional Allocations

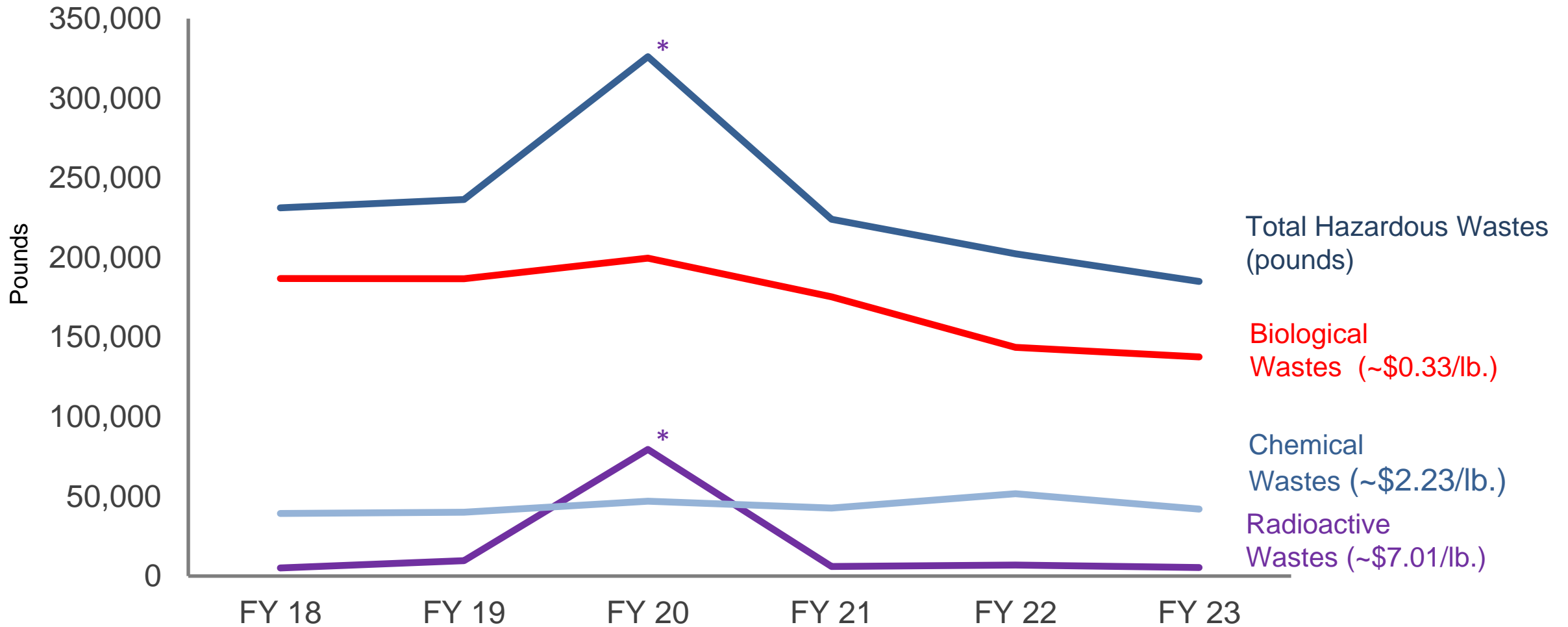


Source: FPE, Space Management

Note: TNASF reported in FY18 & FY19 reduced due to accounting adjustment by FPE

Annual Hazardous Wastes Volumes Generated (in pounds)

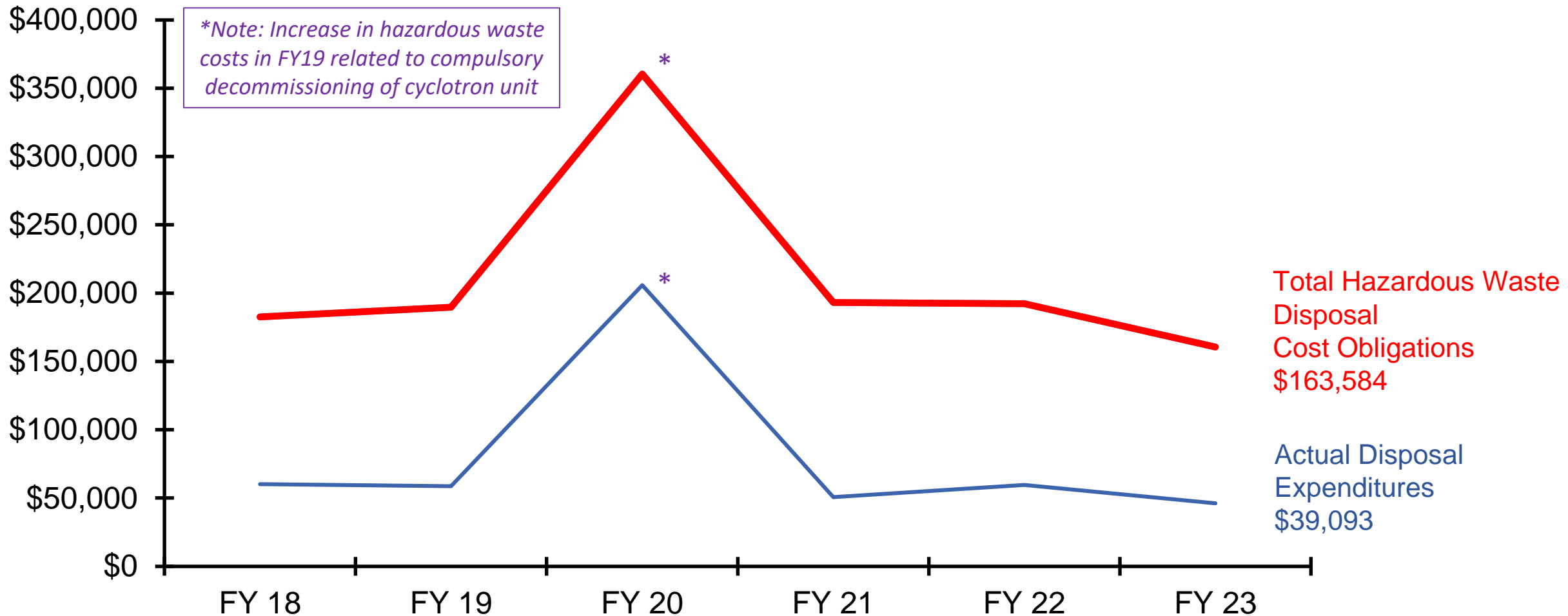
(inclusive of all Hazardous Biological, Chemical, and Radioactive Waste Streams)



Cost per pound associated with each waste stream reflects average cost obligations for offsite disposal

**Note: Increase in radioactive wastes in FY19 related to compulsory decommissioning of cyclotron unit*

Total Hazardous Waste Cost Obligation and Actual Disposal Expenditures (Inclusive of Biological, Chemical, and Radioactive Wastes)



FY23 savings: \$124,491 *

*Savings represented does not include costs for disposal of Cs¹³⁷ source covered by participation in the federal CIRP program (~\$200,000)

FY23 Revenues

Service contracts

- UT Physicians \$824,000

Note: Previous SHERM safety services contract for UTPhysicians was folded into the UTHealth/UTPhysicians MOU on Sept 1, 2020 at a rate of \$800,000 per year. This amount includes \$137,800 for Occupational Health Program. On Sept 1, 2022 there was a 3% increase to \$824,000. The amount designated for the Occupational Health Program has been increased to \$150,000.

Continuing education courses/outreach

- Training, honoraria, peer reviews, fit testing for non-UTHealth Houston personnel \$27,455

SHERM staff salary offsets from various research grants \$32,655

Total \$884,110

NOTE: Above equates to 23% of total SHERM budget for FY23

Safety Support for UT Physicians

UTHealth Houston / UTPhysicians MOU

- SHERM Professional Services Agreement transitioned to UTHealth / UTPhysicians MOU at the request of UTHealth leadership on Sept 1, 2020
- Combination of safety, property protection and recovery, insurance, and occupational health services under one contract; safety services include training, radiation safety permitting & surveys, general clinic surveys, fire & life safety surveillance, waste management, emergency preparedness & response, IAQ evaluations, asbestos/mold monitoring, accident/incident investigations, CAP/CLIA quality control monitoring, interface and support to infection prevention and control program, etc.
- SHERM plans to add 1 FTE position in the Hospital and Clinic Safety Program in FY24 to add support for the UT Physicians clinical enterprise

Challenges

- Continued growth and change of clinical locations and services
- Tracking and managing all locations with radiation producing devices
- Emergency management for UTP clinics in different geographic locations (spanning an area roughly the size of the state of Connecticut)

Current UTHealth / UTPhysicians Clinical Footprint

UTPhysicians Clinics:

- UTP clinic locations (n=160)
- Additional UTP timeshare locations (currently ~30)

UTHealth Houston Clinics:

- UT Health Services Clinic (Employees and Medical Residents)
- UT Student Health Services Clinic
- UTSD dental clinics and faculty practice (n=5)
- Neurosciences (n=17)
- WIC clinics (n=6)

Harris County Psychiatric Center + Dunn Behavioral Science Center (534 total beds)

FY24 Challenges - Financial

Current Financial Challenges

- Continued support to fit test and train high number of individuals participating in respiratory protection program due to COVID-19
- Efforts to reduce chemical waste generation by exploring safe alternatives and possible beneficial reuse opportunities for MMS Pathology department have not been successful; new contracts for department have resulted in significant chemical waste volume increases; transition to large quantity generator status will be required
- Continued increases in retained loss medical expenses due to transition of UT Medical Foundation residents to UT System workers' compensation policy upon becoming UTHealth employees
- Recent increase in property insurance deductible from \$250K to \$500K
- Current shortfall in funding for Occupational Health Program
 - \$450,000+ currently necessary to run program, increases anticipated due to recent medical resident transition
 - WCI RAP funds being used to support program, but these funds fluctuate and may not be issued again in future
 - \$150,000 now coming from UTHealth / UTPhysicians MOU to help support Occupational Health Program

FY24 Planned Actions - Financial

Expenditures

- Continue aggressive hazardous waste minimization program to contain hazardous waste disposal costs
- Apply for large quantity generator status for MMS location, which will require additional administrative and financial resources
- Focus on regulated medical waste generation reduction in labs and clinics due to 30% increase experienced during most recent (Sept 1, 2019) renewal of UT System-wide contract
 - Fees increase significantly each fiscal year for each point of collection, so primary focus is on minimizing volumes and maximizing efficiency to reduce stop frequencies
- Continue to lobby for dedicated funding for Occupational Health Clinical Services Agreement because of fluctuation of amounts and impending discontinuance of UTS WCI RAP

Revenues

- UTHealth Houston / UTPhysicians MOU now includes occupational health allocation of \$150,000
- Continue with service contracts and community outreach activities that provide financial support to supplement institutional funding, including enhancing virtual training capabilities
- Continue to participate in various research grant projects which allow for staff salary offsets
- Continued receipt of WCI RAP fund allocations in FY23 (\$267,529), representing a significant increase due to reduced accident and injury occurrence in previous years during COVID-19

KPI #4: Client Satisfaction

External clients served

- Results of Client Satisfaction Survey of Information Technology staff

Internal department staff

- Summary of ongoing staff professional development activities

Client Feedback

Focused assessment of a designated program aspect performed annually:

- FY03 – Clients of Radiation Safety Program
- FY04 – Overall Client Expectations and Fulfillment of Expectations
- FY05 – Clients of Chemical Safety Program Services
- FY06 – Clients of SHERM Administrative Support Staff Services
- FY07 – Feedback from Employees and Supervisors Reporting Injuries
- FY08 – Clients of Environmental Protection Program Services
- FY09 – DMO/ASL Awareness Survey of Level of “Informed Risk”
- FY10 – Clients of Biological Safety Program Services
- FY11 – Feedback on new UTHealth Houston ALERT emergency notification system
- FY13 – Clients of HCPC Safety Program Services
- FY14 – Student Perception Survey question regarding safety program
- FY15 – Clients of Occupational Safety & Fire Prevention program services
- FY16 – Clients of HCPC Safety Program Services (re-evaluation of services since 2013 implementation)
- FY17 – Area Safety Liaisons
- FY18 – Clients of UTPhysicians Safety Program Services
- FY19 – UTHealth Houston Safety Committee Members (Safety Council, Institutional Biosafety, Chemical Safety, & Radiation Safety Committees)
- FY20 – UT Police at Houston
- FY21 – Center for Laboratory Animal Medicine and Care
- FY22 – Student Services Council Members
- **FY23 – Information Technology**

Information Technology Client Satisfaction Survey

Web based survey distributed from June 28 through July 28, 2023 to current Information Technology department staff members

[Survey response rate: 43 out of 418 (10%)]

Note that 64 out of 418 (15%) partially completed surveys were submitted, but 21 surveys could not be used due to incomplete submission

Survey Question	Responses					
	Not Applicable	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
1. EHS is responsive to IT requests for health and safety services	11 (26%)	0 (0%)	1 (2%)	11 (26%)	1 (2%)	19 (44%)
2. I understand how to get access to EHS via phone or email	6 (14%)	0 (0%)	6 (14%)	8 (19%)	6 (14%)	17 (40%)
3. EHS staff act in a professional and courteous manner	9 (21%)	1 (2%)	0 (0%)	8 (19%)	2 (5%)	24 (56%)
4. EHS staff treat myself and other IT staff with respect	11 (26%)	1 (2%)	0 (0%)	8 (19%)	3 (7%)	20 (47%)
5. EHS staff are technically proficient and provide added value regarding health and safety concerns	10 (23%)	1 (2%)	0 (0%)	10 (23%)	5 (12%)	17 (40%)
6. EHS is proactive in identifying health and safety issues that may impact IT operations and personnel	11 (26%)	1 (2%)	0 (0%)	7 (16%)	9 (21%)	15 (35%)
7. EHS operates cooperatively with IT during times of emergency	11 (26%)	0 (0%)	0 (0%)	7 (16%)	4 (9%)	21 (49%)
8. EHS is sufficiently involved with plan reviews for projects, renovations, and activities to provide guidance on health and safety issues	10 (23%)	1 (2%)	0 (0%)	9 (21%)	3 (7%)	20 (47%)
9. Any health and safety issues related to performing my job tasks remotely (remote work or work-from-home) have been satisfactorily addressed	15 (35%)	0 (0%)	2 (5%)	9 (21%)	2 (5%)	15 (35%)

	Not Applicable	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
10. I feel sufficiently trained in the following areas of health and safety based on my job duties and expectations:						
Materials handling and safety lifting techniques	13 (30%)	1 (2%)	2 (5%)	10 (23%)	6 (14%)	12 (28%)
Workplace ergonomics	6 (14%)	1 (2%)	3 (7%)	11 (26%)	11 (26%)	11 (26%)
Motor vehicle driving safety	20 (47%)	1 (2%)	0 (0%)	9 (21%)	1 (2%)	12 (28%)
Safely entering research laboratories or clinical areas to provide IT services or support	21 (49%)	1 (2%)	1 (2%)	7 (16%)	4 (9%)	9 (21%)
Requirements for fire or life safety-related IT work (such as electrical safety, lockout / tagout, ladder safety, penetrating fire rated walls or doorways)	19 (44%)	2 (5%)	2 (5%)	5 (12%)	5 (12%)	11 (26%)
11. I am aware of the requirement to report any injuries or exposures experienced in the workplace immediately to my supervisor or their designee	4 (9%)	1 (2%)	0 (0%)	5 (12%)	7 (16%)	26 (60%)
	No Previous Experience	Much Worse	Worse	About the Same	Better	Much Better
12. If you have interacted with EHS programs at other institutions, please rate how the service provided by the UHealth EHS department compares to your previous experience.	28 (65%)	0 (0%)	0 (0%)	3 (7%)	8 (19%)	4 (9%)

Internal Department Staff Satisfaction

- Continued support of ongoing academic pursuits – leverage unique linkage with UT SPH for both staff development and research projects that benefit the institution
- Weekly continuing education sessions on a wide variety of topics – conducted continuously via virtual format during COVID-19
- “Safety Geek of the Week” staff recognition award for superior service delivery
- Participation in the delivery of UT SPH continuing education course offerings
- Participation in various UT SPH academic courses
- Adjunct academic appointments in UT SPH EOHS department for doctorally-prepared staff (n=5)
- Participation on several health and safety related training grants through UT SPH
- Active membership, participation, and leadership in professional organizations
- Participation in invited university EHS program peer reviews
- Annual conduct of “SHERM Mentoring Day” where any interested staff member can meet with the VP SHERM to discuss professional development plans and seek advice, suggestions

FY24 Planned Actions – Client Satisfaction

External Clients

- Continue with “customer service” approach to operations
- Enhancements to client satisfaction survey process and data (results) communication and display
- Continue collecting data for evidence-based benchmarking to compare safety program staffing, resourcing, performance, and outcomes
- Planned survey for FY24 will assess SHERM’s interface with UTHHealth Houston academic deans

Internal Clients (departmental staff)

- Continue with routine professional development seminars
 - Special focus on emerging issues: awareness of mental and behavioral health indicators of concern; development of new training program focused on safety issues inherent in psychiatric healthcare setting
 - Other training topics: safety culture, insider threats, change management, technology in safety (digital safety), worker well being, cultural intelligence, communications, establishing relationships, understanding the exposome, combating fraud in safety
- Continue with involvement in training courses and outreach activities – continued focus on cross training
- Continue mentoring sessions on academic activities
- Continue 360° evaluations on supervisors to garner feedback from staff

Institutional Safety Service KPI Caveats

Important to remember what isn't effectively captured by these metrics:

- Increasing **complexity of research and clinical projects supported**
- Increased **collaborations** and associated challenges
- Increased **complexity of regulatory environment**
- Impacts of **construction** – both navigation and reviews
- The **pain, suffering, apprehension** associated with any injury – every dot on the graph is a person
- The things that didn't happen

SHERM Contribution to the **Community Service** Institutional Mission

- Safety, property protection and recovery, and occupational health support to UT Physicians clinical operations
- Staff membership on local safety committees:
 - Institutional Biosafety Committees (Rice University; University of Houston – Downtown)
 - Radiation Safety Committees (Memorial Hermann Hospital)
- Delivery of professional continuing education courses through UT SPH
- Key participant in TEPHI training activities resulting in the receipt of the 2023 Harrison C. Spencer Award for Outstanding Community Service from the Association of Schools & Programs of Public Health
- Participation in the leadership and management of professional associations by SHERM staff members
 - American Biological Safety Association – International
 - Inclusive of the Governing Council and the peer reviewed journal (*Applied Biosafety*) Editorial Board
 - Southern Biosafety Association (local affiliate of ABSA - International)
 - State of Texas Chapter of the Health Physics Society
 - American Academy of Health Physics
 - Risk & Insurance Management Society
- Service in FEMA's ROSS program (Radiological Operations Support Specialist) representing the Greater Houston area, including participation in preparedness drills with TXDSHS, NRC, TDEM, COH officials, etc.
- Outreach education through invited lectures provided to local and national professional organizations
- Provision of subject matter expert interviews on safety-related topics to local and national media

SHERM Contribution to the Teaching Institutional Mission

- UT SPH academic instruction, student advising
 - Several SHERM employees serve in adjunct faculty positions at SPH
- Guest lectures at other UTHealth Houston schools (MMS and GSBS) and other institutions (US Naval Post Graduate School, TAMU, TSU, UHCL, UHD)
- Host student internships, practica. Advising for MMS Scholarly Concentration students
- Continuing education courses through UT SPH
- Outreach education through courses with professional organizations (HPS, ASSP, ABSA plus several local affiliate chapters, CSHEMA, PRIMR)

SHERM Contribution to the Research Institutional Mission

- US Public Health Service training grant (w/ Dr. Janelle Rios, UT SPH)
- Participation in other funded grants:
 - NIOSH ERC SWCOEH
 - TSU Health Physics Program - \$11,000
- Advising and hosting students for research projects and associated publications:
 - Emery RJ, Patlovich SJ, King KG, Rios J. A means of codifying safety cross-training knowledge expectations for biosafety professionals. *Appl Biosaf* 28:1 11-21, 2023.
 - Cerda A*, Emery RJ, Patlovich SJ. Sustainability considerations for consumables used in microbiological and biomedical laboratories. *Appl Biosaf* 28:1 55-60, 2023.
 - Emery RJ, Patlovich SJ, Delclos GL. Worker well-being: transforming from a traditional to a more holistic OSH program. *Prof Saf* 68(5): 23-25, 2023.
 - Emery RJ, Patlovich SJ, Rios J. Considerations for occupational safety and health professionals to prepare for the next pandemic. *Prof Saf* accepted, in press September 2023.
 - Patlovich SP King KG, Emery RJ, Becker Z, Kairis R. Practical considerations for navigating withdrawal from the Federal Select Agent Program. *Appl Biosaf* accepted, in press September 2023 APB-2023-0014.
 - Emery RJ, Howell D. Case studies of fraud associated with the use of radiation sources: practical avoidance strategies based on lessons learned. *Health Phys* in press October 2023.
 - Emery RJ, Gutierrez JM, Zwick M. A compendium of radiation safety practices that compliment organizational worker well-being initiatives. *Health Phys* submitted October 2023 HPJ-D-23-00160.
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Summary

Various measures and metrics indicate that SHERM continues to meet its objective of maintaining a **safe and healthy** working and learning **environment** in a **cost effective** manner that **doesn't interfere with operations, while also making active contributions to the institutional missions:**

- Injury rates continue to be among the lowest within the UT System
- Despite continued growth in the research enterprise, hazardous waste costs aggressively contained
- Client satisfaction continues to be measurably high
- And while providing these services, SHERM also actively contributes to the teaching, research, and community service missions of the institution

The major area of current institutional growth is in the clinical setting, so SHERM will need to adjust accordingly to support these enterprises

The impending discontinuance of the UTS WCI Resource Allocation Program represents a challenge, especially for the Occupational Health program

A successful safety program is largely “people powered” – the **services most valued by clients cannot be automated!**

SHERM resource needs will continue to be **driven primarily by the square footage to which services are provided** (total, lab and clinic square footage) and geographic distribution

