

Office of Safety, Health, Environment, and Risk Management

FY25 Metrics-Based Performance Summary

Key Performance Indicators of
Losses, Compliance, Finances, and Measured Client Satisfaction

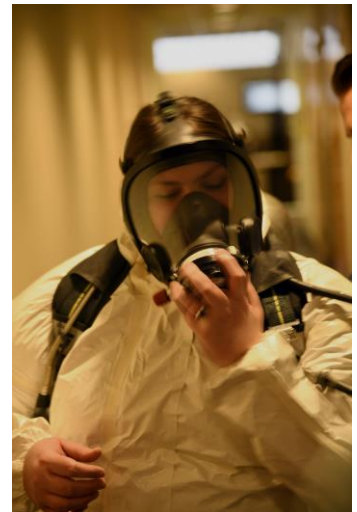


UTHealth Houston Institutional Missions and SHERM's Role, Contributions

UTHealth Houston institutional missions:

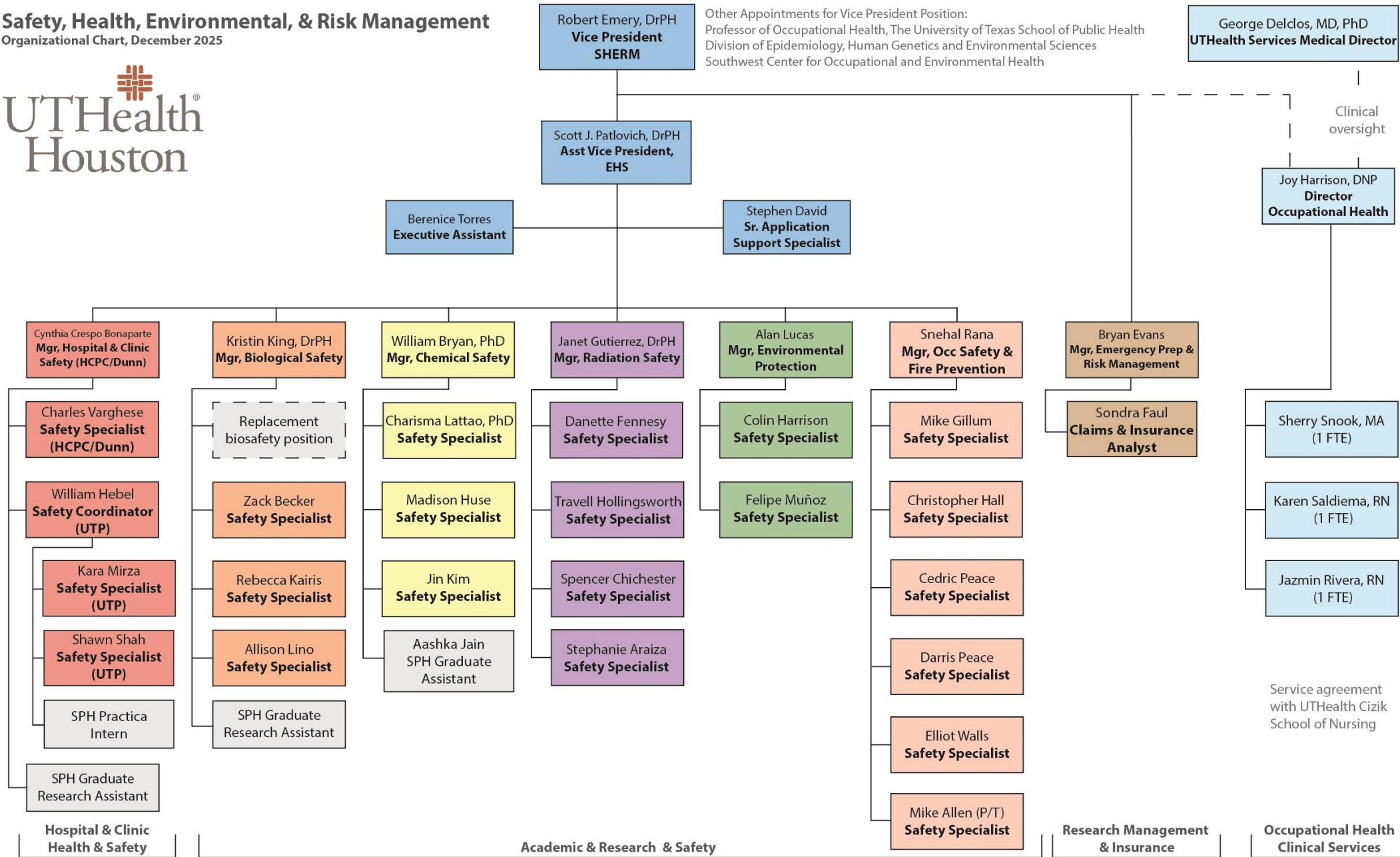
- Teaching
- Research
- Service
 - Institutional Service (SHERM's primary role)
 - 4 Key Performance Indicators (KPI) of safety services provided
 - Community Service

While SHERM is primarily an institutional service provider, the office also contributes to the other key institutional missions as well



SHERM reports to the Executive Vice President & Chief Academic Officer
with dotted reporting line to the Chief Operating Officer

Safety, Health, Environmental, & Risk Management
Organizational Chart, December 2025



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

KPI 1: Losses

1a: Personnel

1b: Property

KPI 2: Compliance

2a: With external agencies

2b: With internal assessments

KPI 3: Finances

3a: Expenditures

3b: Revenues

KPI 4: Client Satisfaction

4a: External clients served

4b: Internal department staff

Annual Report Format and Approach

- This annual report showcases the **four KPIs** and provides **supporting data from FY25** for the measured outcomes associated with each.
 - The **actions** taken by SHERM to achieve these **outcomes** are summarized.
- Then, based on what we learned from the data, the **planned actions and strategic steps** to address priorities and needs for FY26 are described.

KPI #1: Losses

1a: Personnel Losses

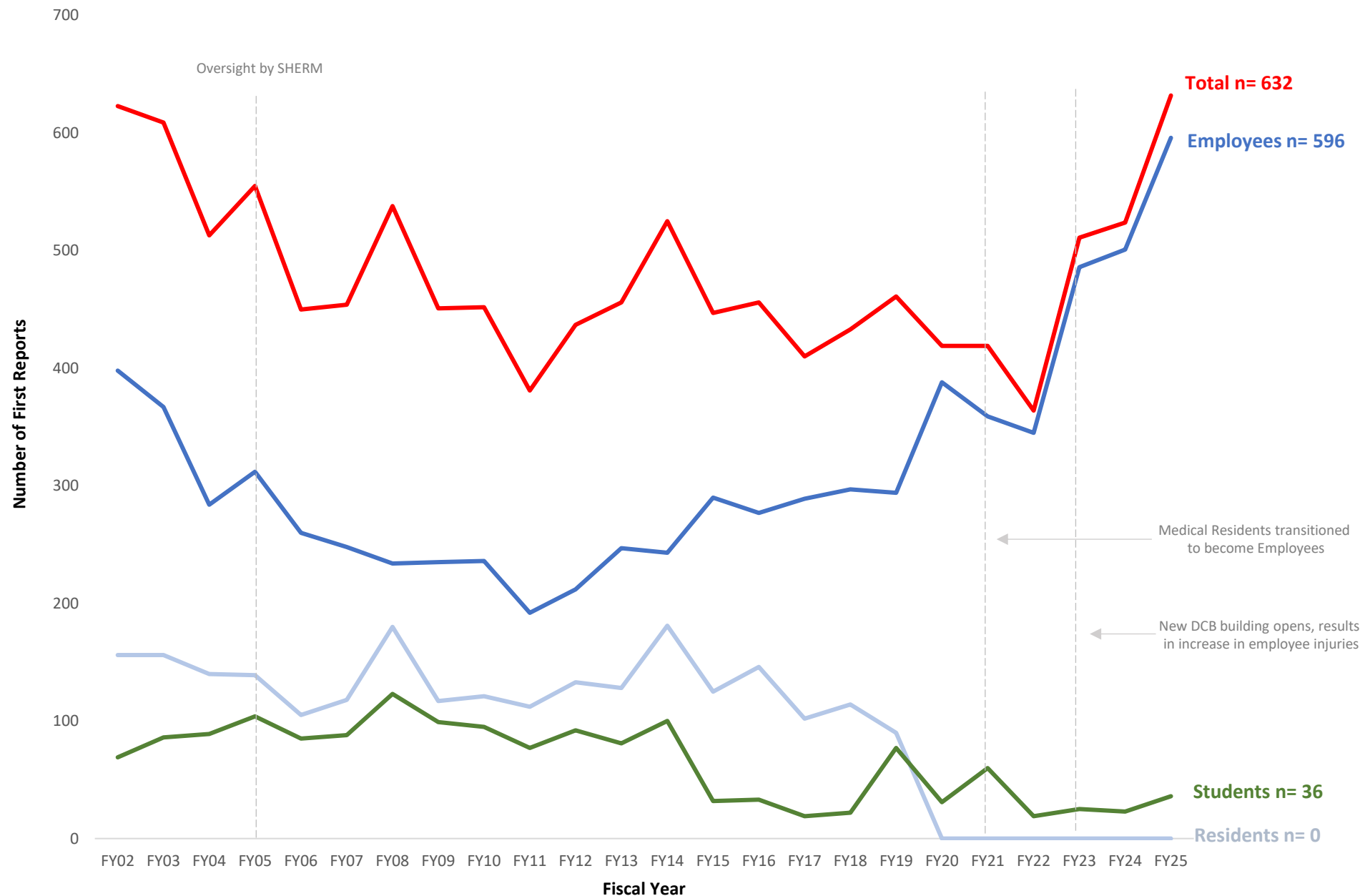
- Number of first reports of injury and illness submitted by employees, residents, students
- Number of reported employee injuries and illnesses requiring medical care
- Workers' Compensation Insurance experience modifier

1b: Property Losses

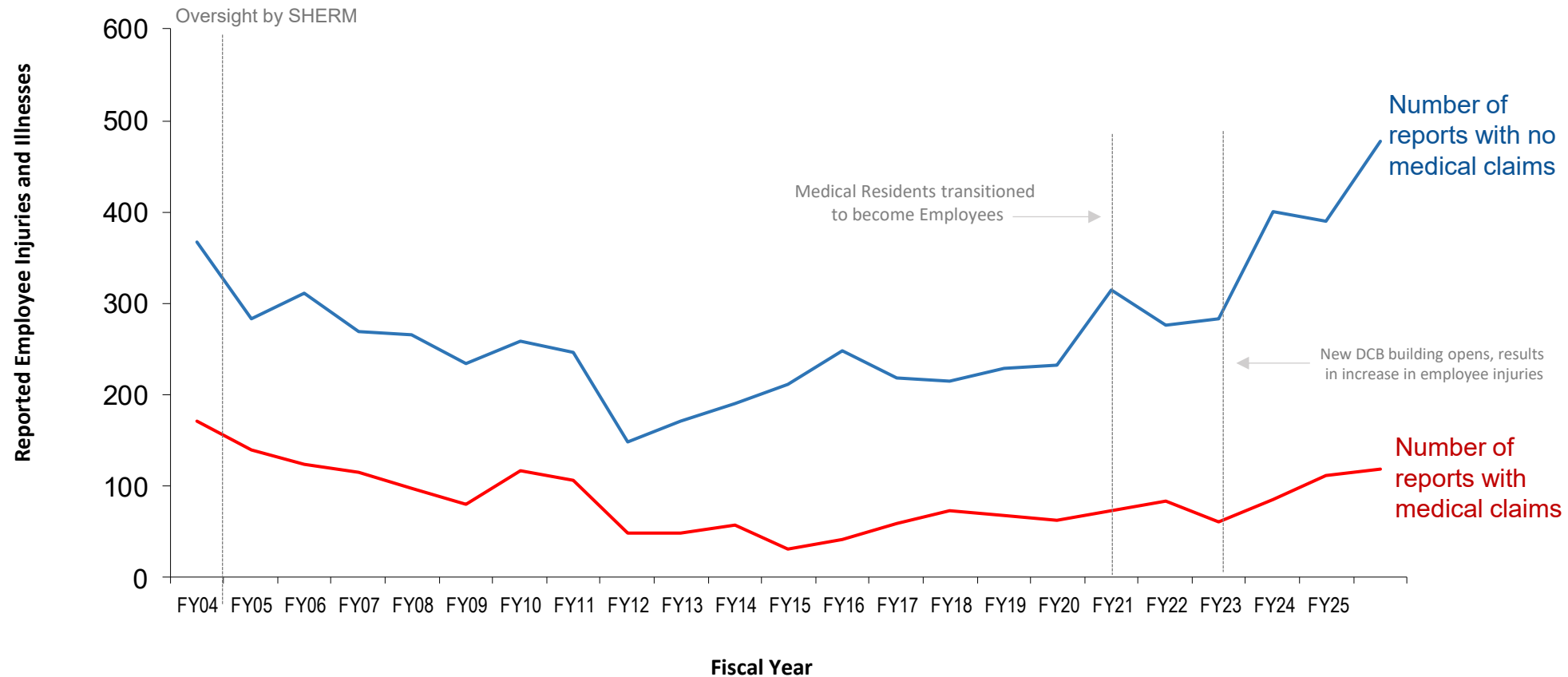
- Losses incurred and covered by UTS Comprehensive Property Protection Program
- Losses incurred but covered by an outside party
- Losses retained by UTHealth Houston

Number of First Reports of Injury, by Population Type, FY01 – FY25

(estimated total population = 17,998; employees: 12,994; students: 5,044)

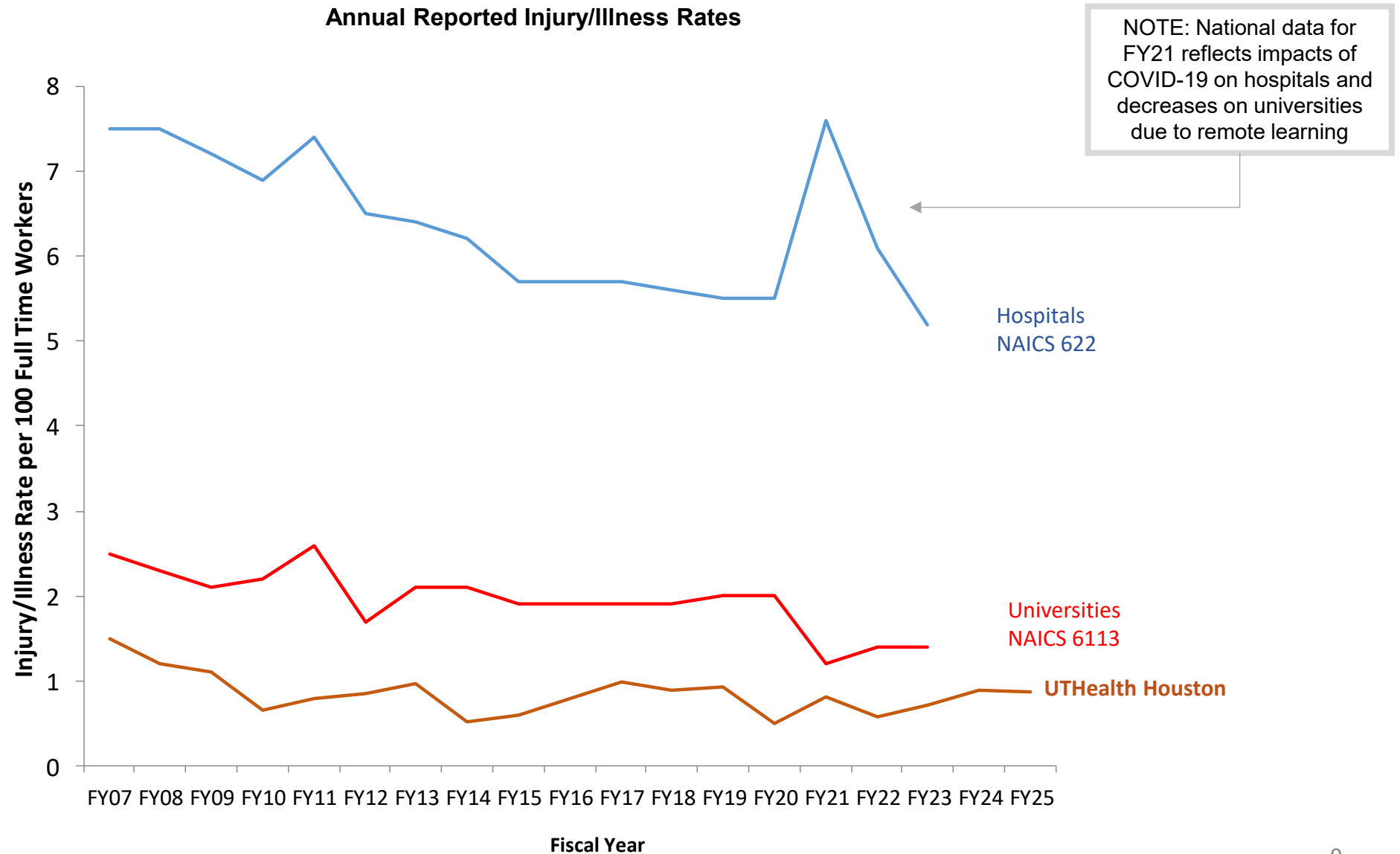


Total Number of Employee First Reports of Injury Without Medical Claims and Subset of Compensable Claims Submitted to UT System, FY03 to FY25



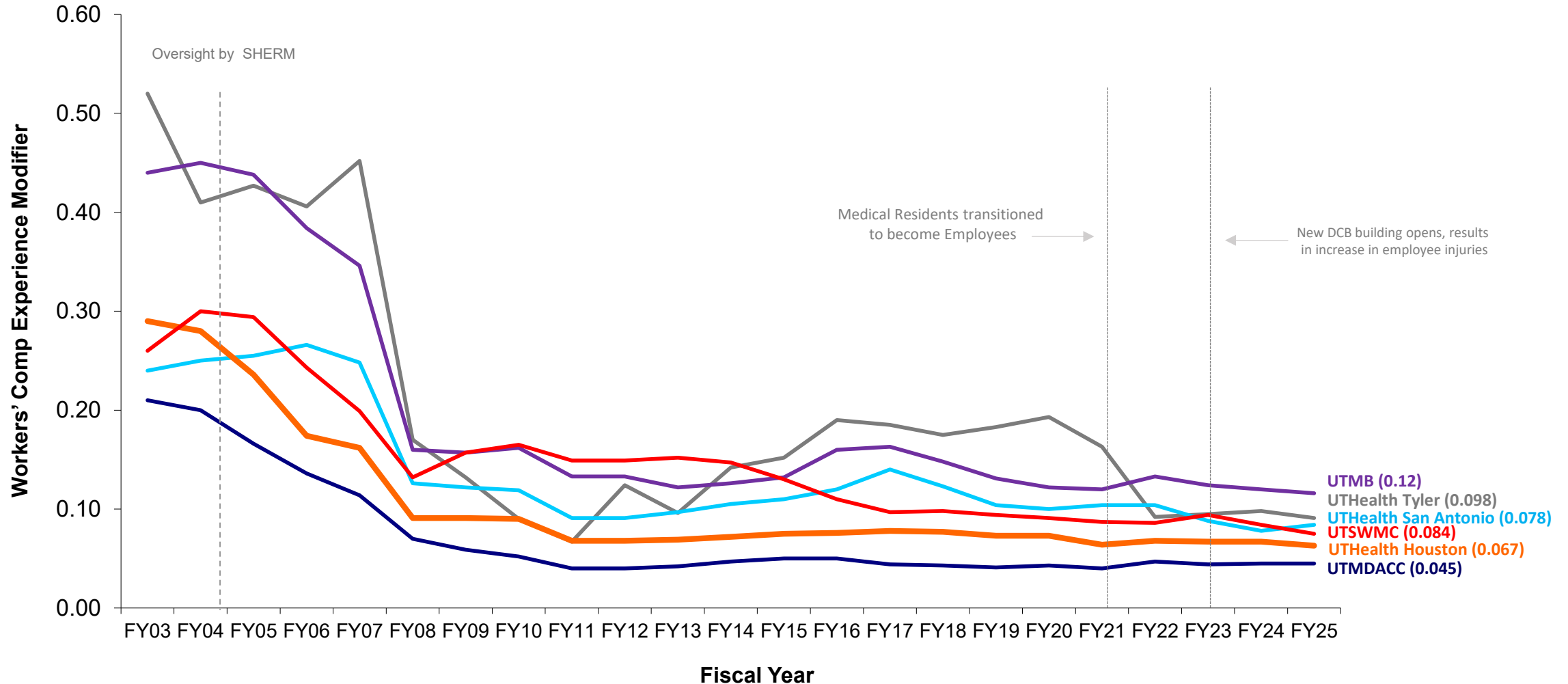
*Opening of new DBC building and increase in UTP clinics has resulted in greater risk of injury due to higher clinical injury exposures

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)

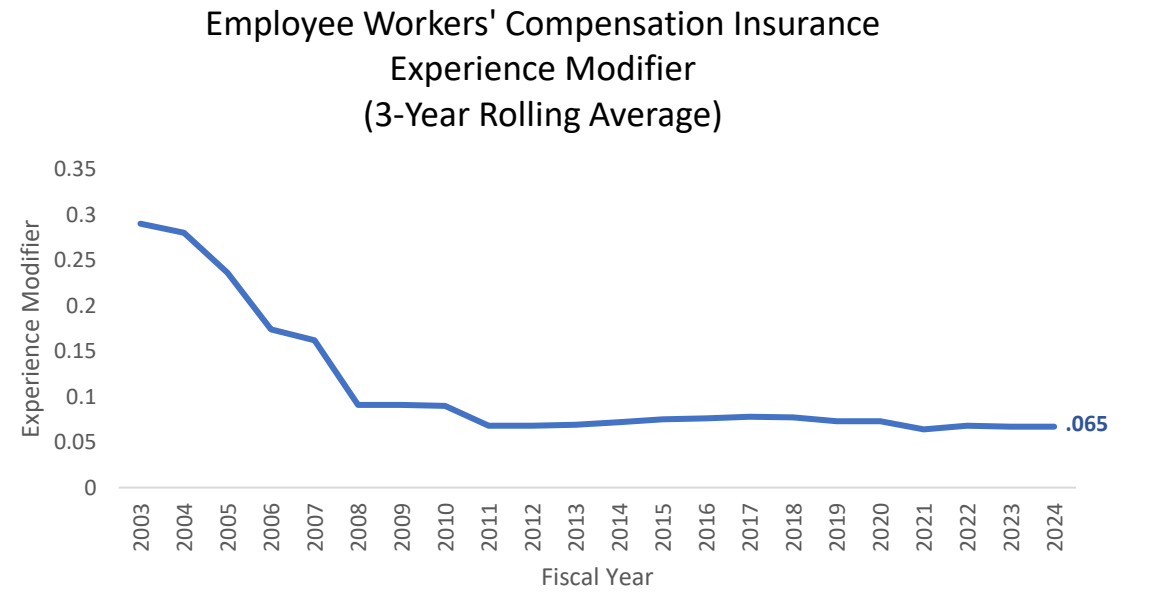
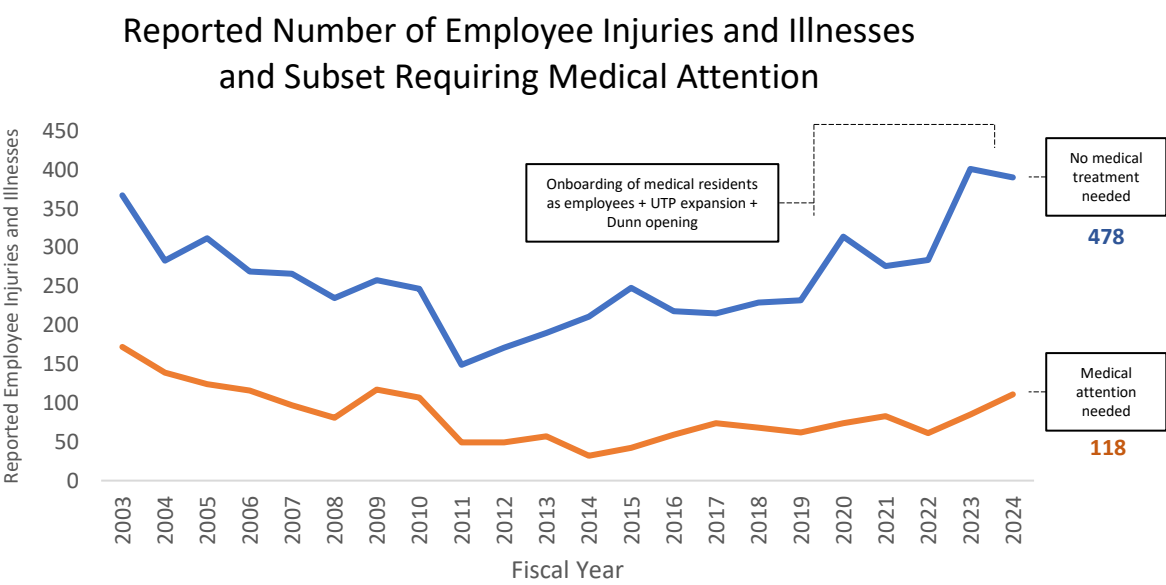
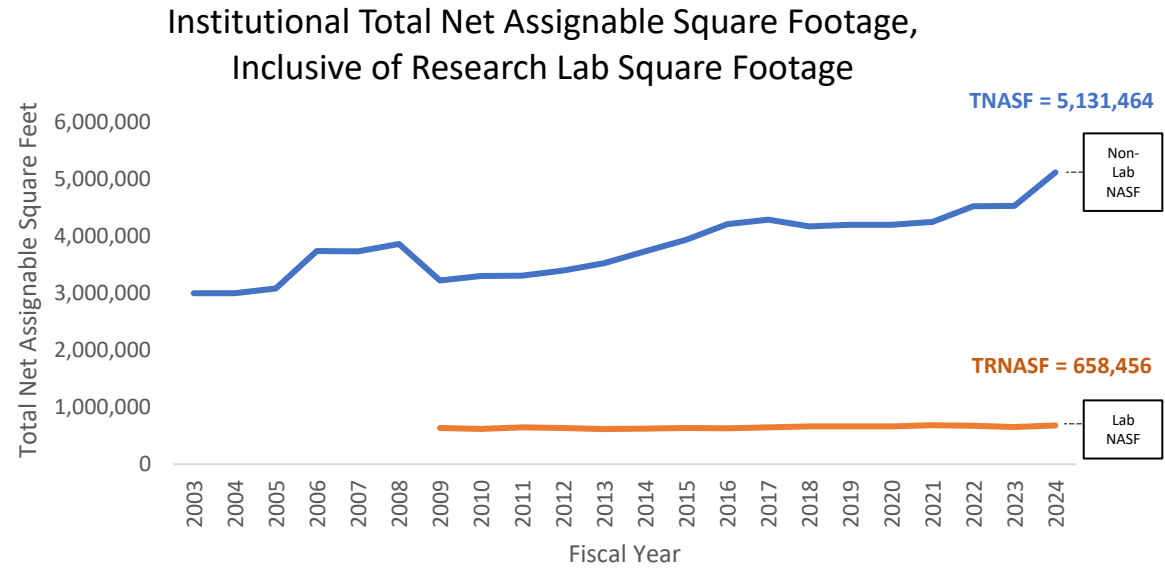
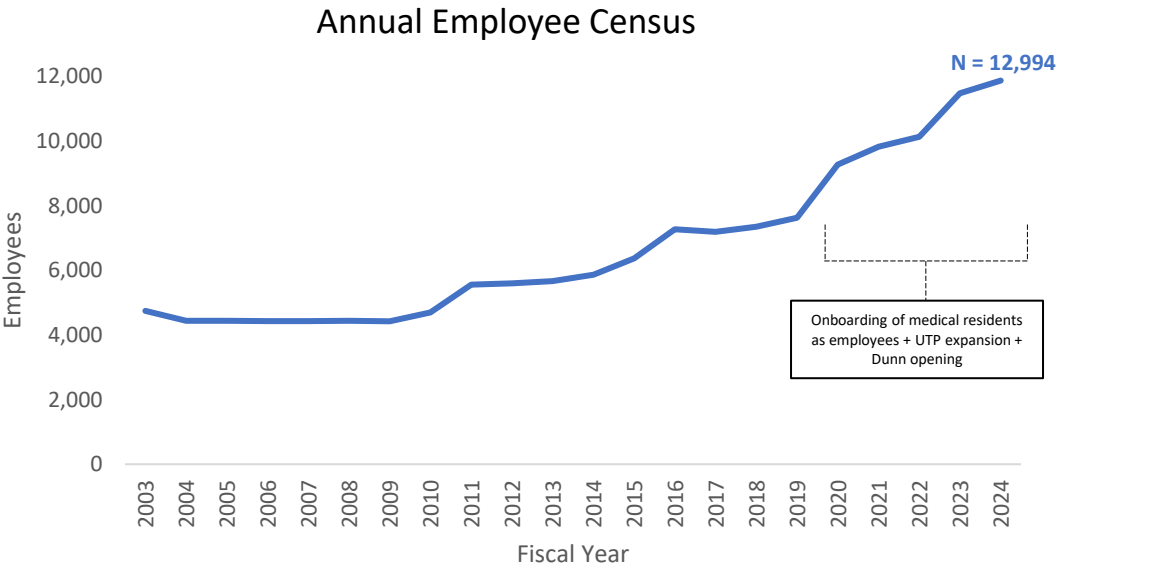


Workers' Compensation Insurance Premium Experience Modifier for UT System Health Institutions, FY03 to FY25

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



UTHealth Houston Institutional Growth and Associated Employee Safety Outcomes, FY2003-FY2025



FY25 Retained Property Losses

▪ Notable Retained Losses (inclusive of insurance deductibles)

Peril`	Location	Date	Cost
Water	UTPB	10/2024	\$17,500
Mold	UTPB	10/2024	\$7,004
Water	MSB	11/2024	\$12,989
Auto	OCB	2/2025	\$1,000
Water	UPB	4/2025	\$2,000
Water	UPB	5/2025	\$2,000
Water	UPB	6/2025	\$1,000
Water	UCT	7/2025	\$30,000
Water	Housing	6/2025	\$3,000
Water	UCT	7/2025	\$17,949
Water	UCT	8/2025	\$800,000
TOTAL			\$894,442

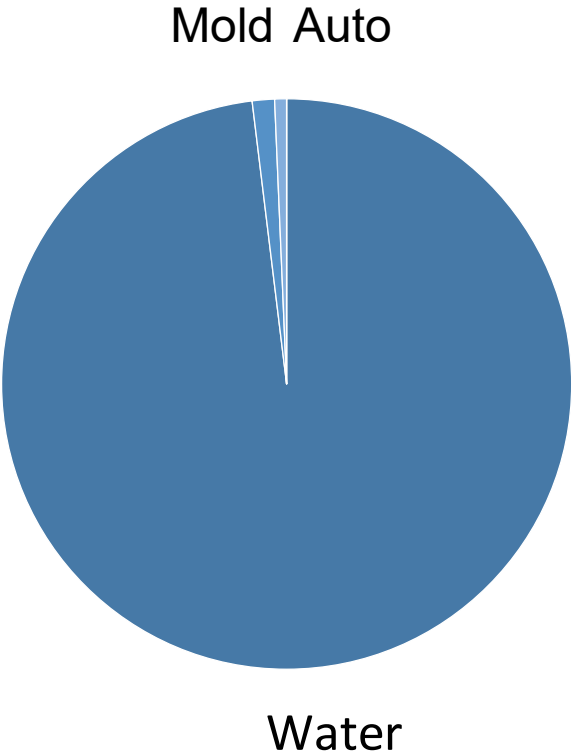
▪ Losses incurred and covered by third party

- Auto-----10/2024 \$500
- Auto-----11/2024 \$5,563
- Water-----12/2024 \$4,000
- Auto-----1/2025 \$700
- Auto-----3/2025 \$1,500
- Auto-----5/2025 \$6,803
- Auto-----5/2025 \$6,384

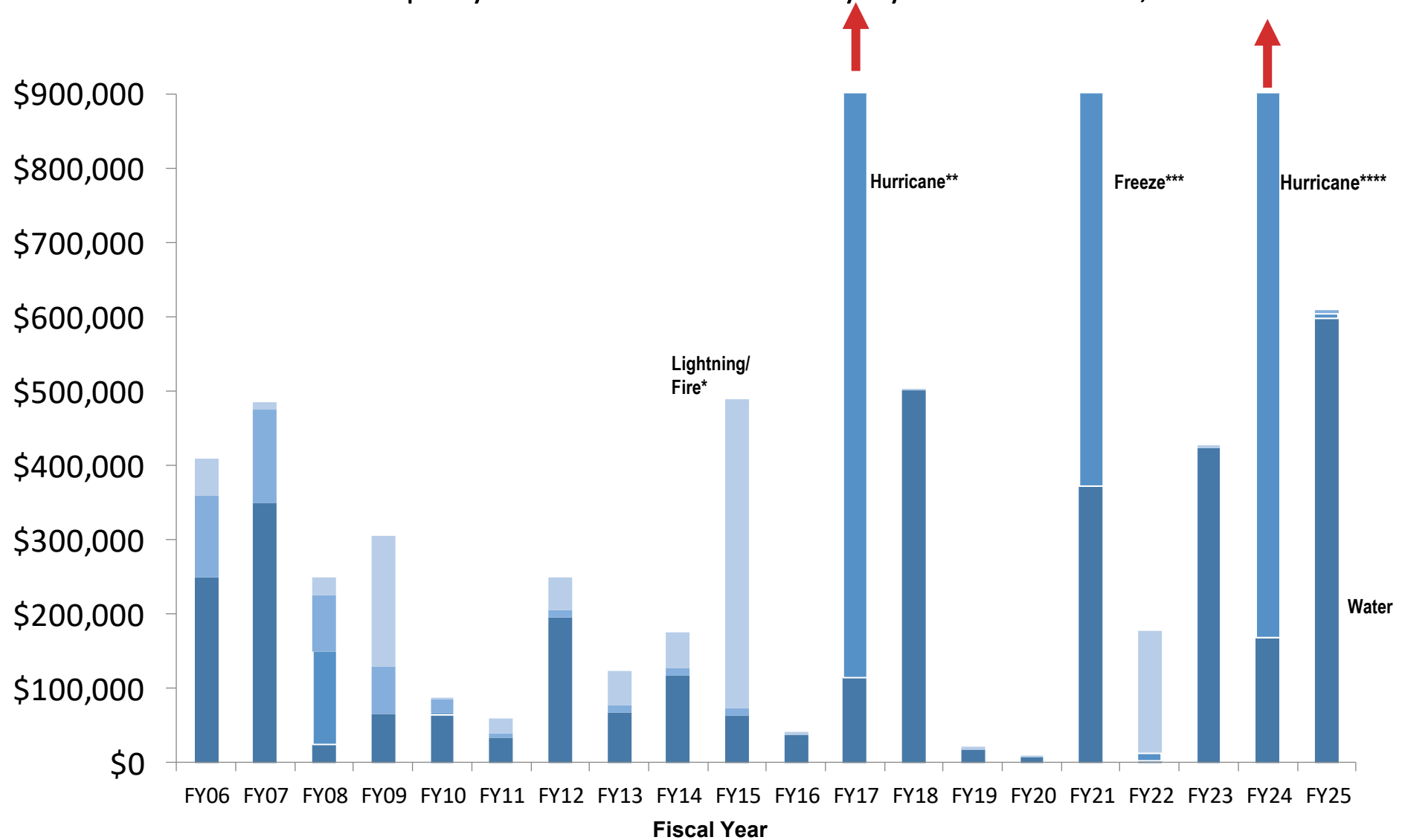
▪ Losses incurred and covered by UTS insurance

- Auto-----9/2024 \$2,191
- Auto-----11/2024 \$2,156
- Auto-----7/2025 \$4,265
- Auto-----7/2025 \$6,409
- Water-----8/2025 \$800,000

Retained Loss Cost Summary by Peril
(Total FY25 retained losses = \$610,046)



UTHealth Houston Total Property Retained Loss Summary by Peril and Value, FY06 to FY25



*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 – Hurricane Beryl losses totaling \$3.1M

What We Learned: FY26 Planned Actions - Losses

Personnel

- Closely monitor the **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
 - Multidisciplinary committee established at HCPC/Dunn to address patient/employee and patient/patient aggression and associated injuries, as well as comply with **new SB 240 requiring workplace violence prevention programs in healthcare**
- 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 the **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

2a: With external regulatory agencies

- Regulatory inspections; other compliance-related inspections by outside entities

2b: With internal preventive assessments

- Results of SHERM routine safety surveillance activities

External Agencies Inspections (n=7)

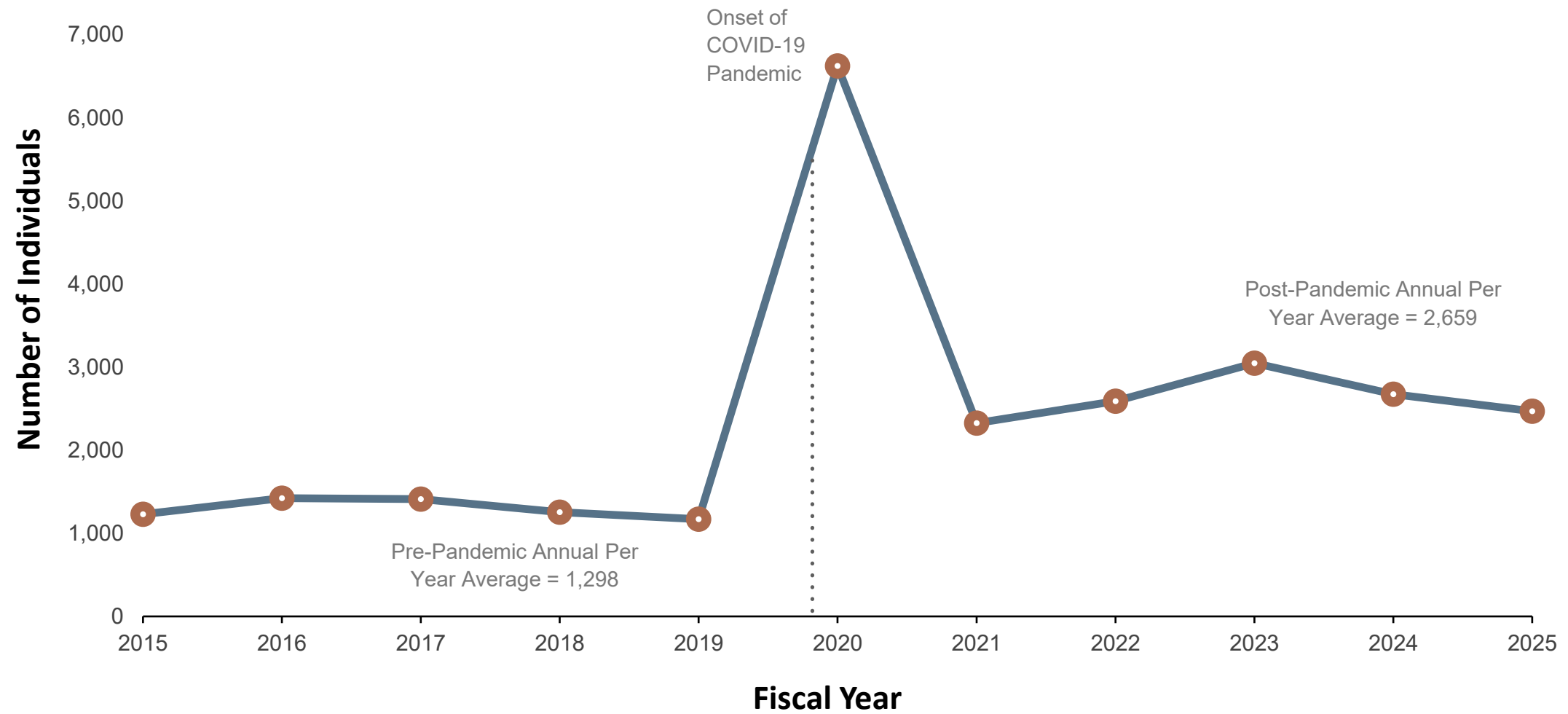
No.	Date	Agency	Announced / Unannounced	Location	Findings	Status
1	9/3/2024	U.S. Department of Agriculture (USDA)	Announced	UTHealth Houston MSE R204 Suite and R427 for Dr. Claudio Soto's Import Permit Program (IPP)	No items of non-compliance	Inspection file closed
2	10/4/2024	Joint Commission	Unannounced (follow-up inspection)	Behavioral Sciences Campus	Surveyors completed their visit for our corrective actions. No additional corrections were added to follow. The hospital received full accreditation until our next JC visit in 3 years.	Inspection file closed
3	3/21/2025	Joint Commission	Unannounced (follow-up inspection)	Behavioral Sciences Campus	The corrective action was submitted and accepted. All delinquent staff completed their CPR certification.	Inspection file closed
4	5/06/2025	Texas Department of State Health Services Radiation Control	Unannounced	UT Physicians, Woodlands Ortho, 9305 Pinecroft Dr, Suite 300-400, The Woodlands, X-ray R26367, Site 020	No items of non-compliance	Inspection file closed
5	5/13/2025 & 5/15/2025	Texas Department of State Health Services	Unannounced	Behavioral Sciences Campus	No items of non-compliance	Inspection file closed
6	7/7-8/2025	Medicare	Unannounced	Behavioral Sciences Campus	No items of non-compliance	Inspection file closed
7	7/29/2025	Texas Department of State Health Services Radiation Control	Announced	UTHealth Houston TMC Campus, various locations for current radioactive material use and/or storage. Currently only generally licensed sources at RAS.	No items of non-compliance	Inspection file closed

Routine Internal Compliance Assessments

5,487 workplace assessments completed and documented by SHERM

- Progression of routine surveillance program emphasis: labs, clinics, building fire systems, mechanical and non-lab spaces
- Now includes all UT SPH regional campus locations across the State of Texas
- 2,033 deficiencies identified (75% in non-lab spaces)
 - 1,256 of these deficiencies now corrected to date
 - EHS will continue to focus on assisting with the correction of remaining deficiencies
 - Working with FPE to track and report progress and reporting progress to appropriate safety committees
 - Working with clinical leadership regarding the improvement of refresher training completion rates
- 16,862 individuals provided with required safety training
 - 2,472 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 (as of FY25, now provided in a virtual format)
 - Continued increase in participation in online safety training modules (primarily refresher lab and clinic safety training)
 - Includes clinical based safety training for all providers at UTSD administering anesthesia, as required by the school
- 95% of PIs have submitted chemical inventories for recording in SHERM database

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



Non-Routine Compliance Activities

- Executive orders impacting dual-use research of concern, pathogens of pandemic potential, and gain-of-function research have been issued and are being closely monitored as the federal government moves to “modernize and strengthen” biosafety oversight in America
- New EPA rules under the **Toxic Substances Control Act** require additional oversight and monitoring for users of trichloroethylene and perchloroethylene (in addition to methylene chloride from FY24)
- Safety oversight for the ongoing construction of the new **Public Health Education and Research Building** project
- Collaborative information sharing session conducted with the **Drug Enforcement Administration** regarding controlled substance oversight in research and healthcare; forthcoming guidance regarding Schedule 1 controlled substances is anticipated
- Onboarding of new **MRI/PET** units on campus, which has required additional oversight and registration
- SHERM modernized and professionalized the Supervisor’s First Report of Injury Form by converting it to a fully electronic form in FY25, eliminating the old paper-based form

What We Learned: FY26 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
- Continue to monitor Executive Orders regarding **Dual Use Research of Concern**, Pathogens of Enhanced Pandemic Potential, and Gain-of-Function research as the federal government unveils new requirements; also the NIH's recent proposal to "modernize and strengthen" biosafety oversight in America
- Prepare for expected campus visits from **State of Texas Fire Marshal's Office** due to inspection program frequency

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 the near future
- Focus on the 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

3a: Expenditures

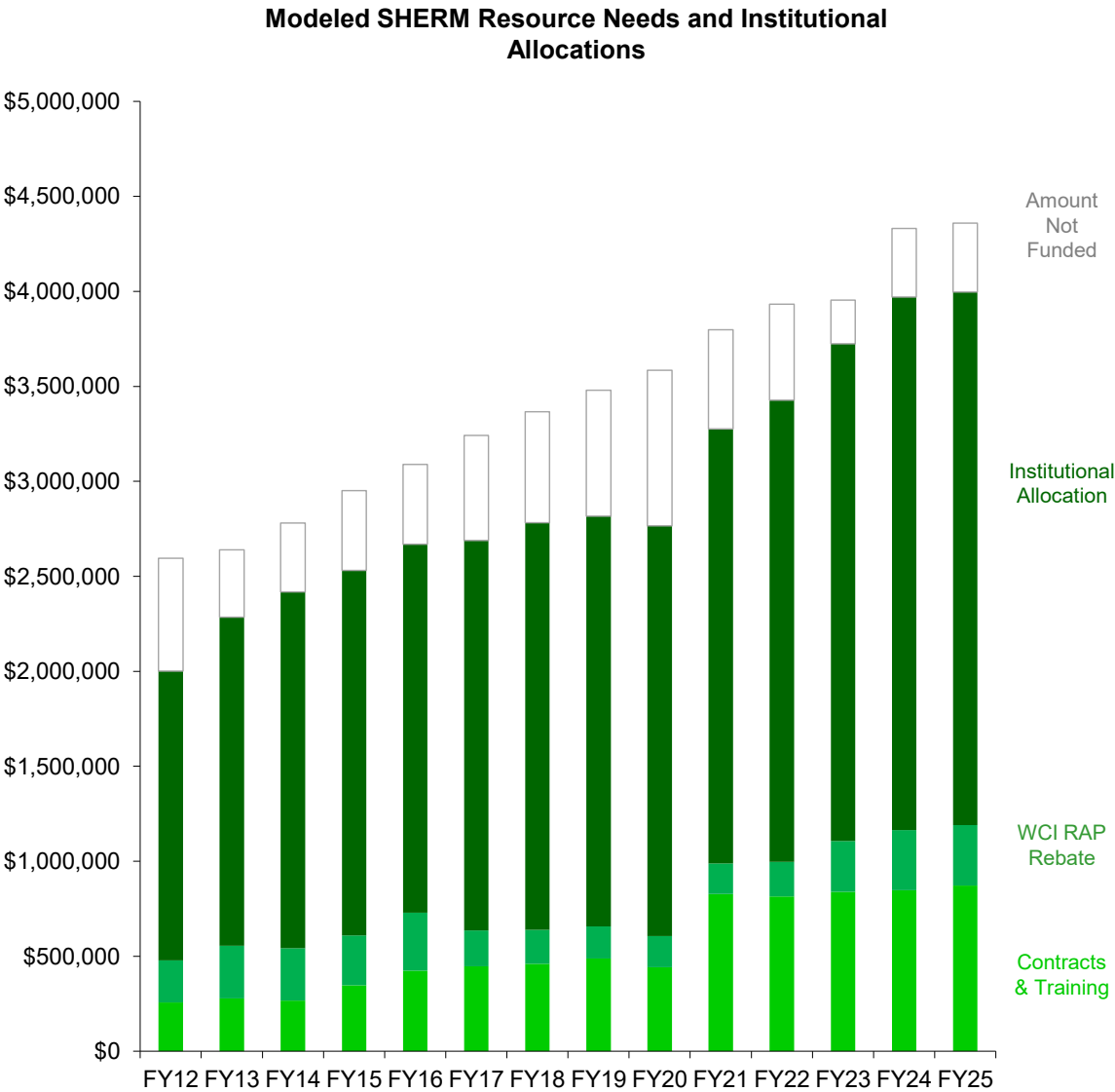
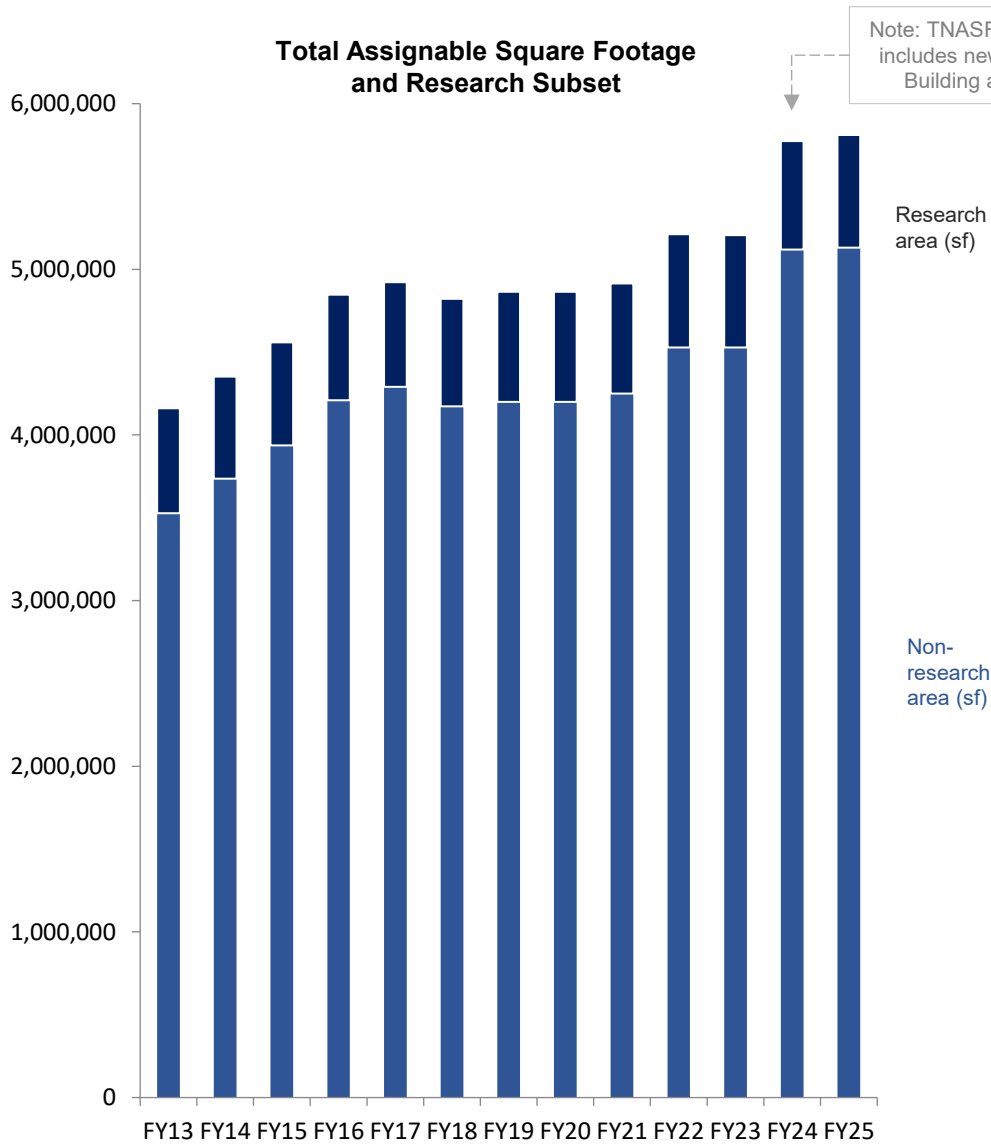
- Program cost, cost drivers

3b: Revenues

- Sources of revenue, amounts

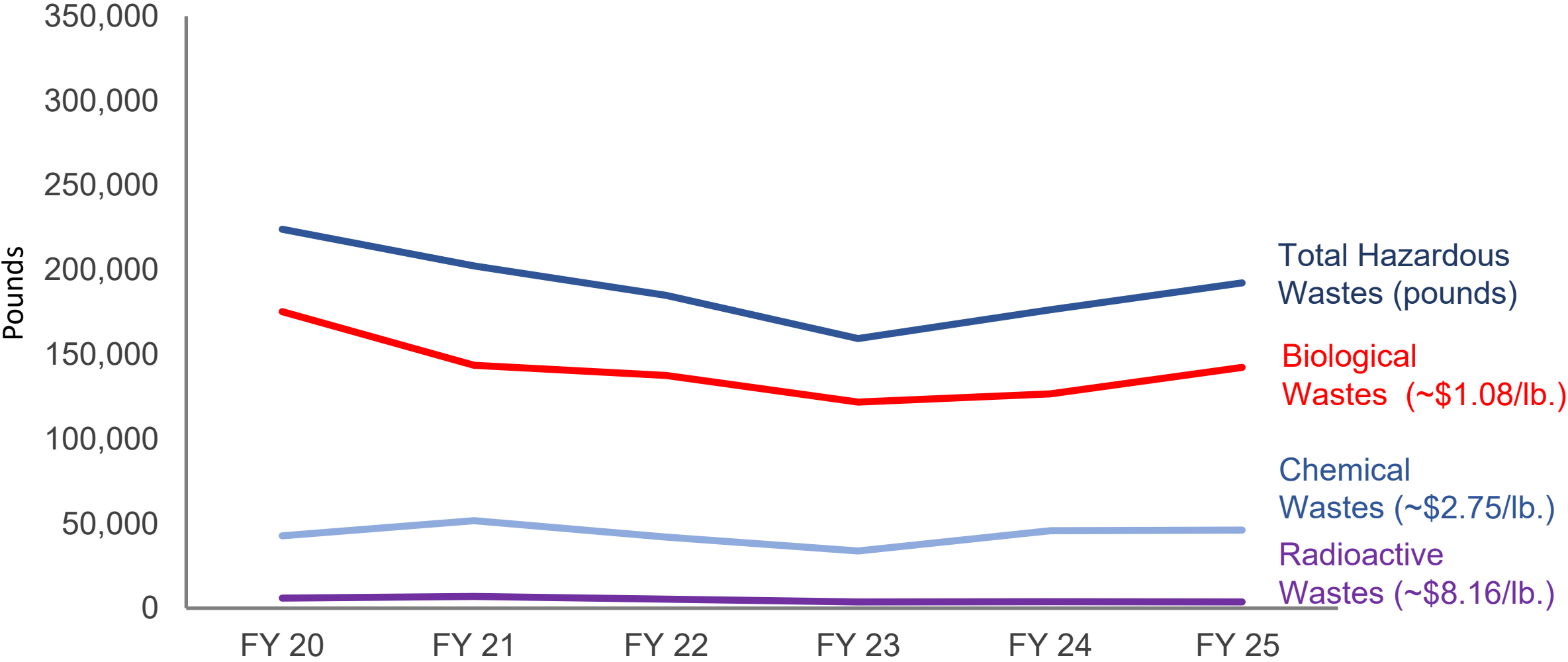
Campus Square Footage, SHERM Resource Needs and Funding

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



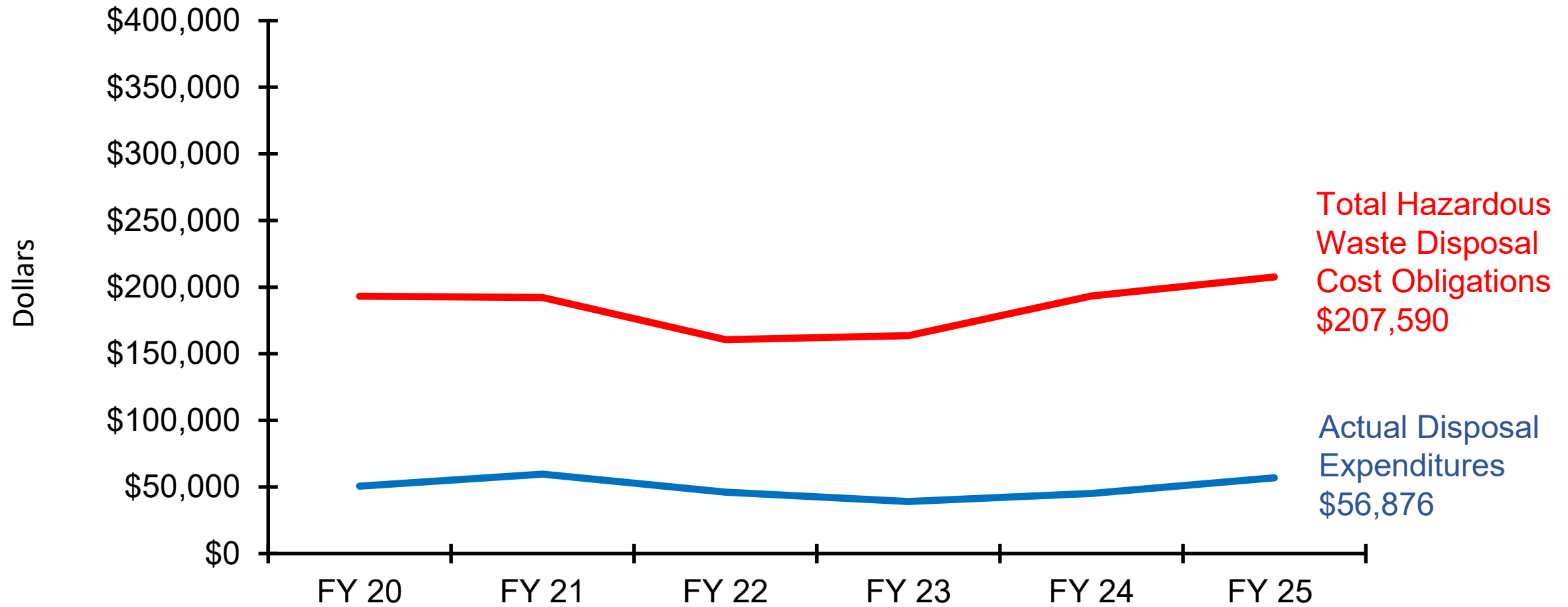
Source: FPE, Space Management

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

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



FY25 savings: \$150,714

FY25 Revenues

Service contracts

- UT Physicians

\$848,720

Note: SHERM provides safety and risk management services to UT Physicians under a MOU for the amount listed above. The amount designated for the Occupational Health Program is \$150,000.

Fee-for-Service Activities

- Professional development training (e.g. SWCOEH and P2R), fit testing for non-UTHealth Houston personnel, etc.

\$9,668

- Peer reviews, honoraria, etc.

\$8,500

SHERM staff salary offsets from various research grants

\$4,800

Total Revenues*

\$871,688

*Equates to 25% of total SHERM budget for FY25

Safety Support for UT Physicians

UTHealth Houston / UTPhysicians MOU

- 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 supported UTP to conduct a thorough review and **update of the UTP Emergency Management Plan** to be published in FY26

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)

UTHealth Houston Clinical Enterprise to Which SHERM Provides Services

UTPhysicians Clinics:

- UTP clinic locations (n=151)
- Additional UTP timeshare locations (currently =11)

Note: UTHealth Houston procured the Bellaire Station building (~390,000 square feet) in FY24. Renovations continued throughout FY25 for clinical space within the building.

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)

FY25 Challenges - Financial

Current Financial Challenges

- Continued support to **fit test and train** a high number of individuals participating in respiratory protection program
- Forthcoming **end-of-service-life** for many (over 100 units) AEDs on campus which will require substantial funding for replacement
- 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
 - Continued increased costs of BBP post-exposure prophylaxis
 - 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
 - Succession planning for UT Health Services Occupational Health Program medical direct

What We Learned: FY26 Planned Actions - Financial

Expenditures

- Continue **aggressive hazardous waste minimization program** to contain hazardous waste disposal costs
- Develop plan for review and approval by Safety Council to **replace AED units** on campus that have met end-of-service-life threshold
- Focus on **regulated medical waste generation reduction** in labs and clinics due to cost increase experienced during most recent (Sept 2024) renewal of UT System-wide contract
- Continue to advocate 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 FY26 (\$319,248), based on continued good safety performance outcomes on campus

KPI #4: Measured Client Satisfaction

4a: External clients served

- Results of client satisfaction survey of Information Technology staff

4b: Internal department staff

- Summary of ongoing staff professional development activities

Client Feedback Strategy

Focused assessment of a designated program aspect captured 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 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
- FY24 School Associate Deans for Management (POSTPONED)
- FY25 Student Perception Survey regarding safety program

Summary of Student Perception Survey Results

Survey questions related to perception of health and safety services on campus are developed with input from SHERM.

1,234 total responses were provided (out of 4,929 total students enrolled, representing 25% of the student population), of which:

195 (33.1%) were very satisfied,

340 (57.7%) were satisfied,

50 (8.5%) were neither satisfied nor dissatisfied,

1 (0.2%) was dissatisfied, and

3 (0.5%) were very dissatisfied **with services provided by SHERM**

- *Action items based on dissatisfied or very dissatisfied feedback include: improvements in safety training content, SHERM website improvements regarding training information, PPE inappropriately worn outside of the laboratory setting, modernization of the hazardous waste collection request process, and increased speed of emergency communications*

The Take Home Message from 25 Years of Client Satisfaction Surveys

Our clients want a safety program with a **service orientation** that is:

- **Responsive, courteous, helpful, compassionate and is knowledgeable and creditable**
- Staff that physically **goes to the client** to meet with them to address their concerns
- **Doesn't unnecessarily interrupt** operations
- Staff that are **empowered to take action** to resolve issues and **span boundaries to solve problems**
- Have **hazardous waste picked up** without a hassle and in a timely manner
- Can readily find **an actual human to speak to** when needed, and determine **who is in charge** when a problem is encountered

Internal Department Staff Satisfaction

- Continued support of ongoing **academic pursuits** – leverage unique linkage with UT SPH for both staff development and student research projects that benefit the institution
- Weekly **continuing education** sessions on a wide variety of topics
- “**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

What We Learned: FY26 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 FY26 will be the completion of the Administrative Deans for Management survey (postponed from FY24)

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: ethics in safety, 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

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

- 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
- Conducted 4 invited peer reviews of other college/university EHS programs
- Participation in the leadership and management of professional associations by SHERM staff members
 - American Biological Safety Association – International
 - Editorial Board for the peer reviewed journal *Applied Biosafety*
 - 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 Community Service Institutional Mission: Philanthropy

- Individual staff contributions to the annual State Employee Charitable Campaign
- Generation of funds and external donations for the *Robert J. Emery Endowed Fellowship in Environmental and Occupational Health Sciences* for UT School of Public Health doctoral student research and tuition (account now > \$145,000)
- Annual departmental contribution to the University Classified Staff Council's student scholarship fund

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)
- 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 and international affiliate chapters, CSHEMA)
- Provide mentorship to STEM students through the Astronaut Scholarship Foundation

SHERM Contribution to the Research Institutional Mission

- US Public Health Service training grant (w/ Dr. Janelle Rios, UT SPH)
- Participation in other funded grants and institutes:
 - NIOSH Education Research Center – Southwest Center for Occupational and Environmental Health (SWCOEH)
 - P2R Consortium
 - Texas Epidemic Public Health Institute (TEPHI)

SHERM Contribution to the Research Institutional Mission

- Advising and hosting students for research projects and associated publications:
 - Emery, R.J., Patlovich, S.J., Brown B., Soares, M., Haltiwanger, B., Gamble, R., King, K. Articulating Biosafety Program Activities in the Context of a Simplified Public Health Logic Model. *Applied Biosafety*, 28 August 2025. doi: 10.1177/15356760251365961
 - Choi AN, Ruiz de Porras DG, Guidry MK, Rios J, Perez F, Emery RJ, Ostrosky-Zeichner L, Delclos GL. Telework and employee well-being during the COVID-19 pandemic: a two-wave survey of employees at a Texas health sciences university. *Archivos de Prevención de Riesgos Laborales* 28(3) 19-36; 2025
 - Emery RJ, Gutierrez JM. Considering radiation safety program image. *Health Phys*:10.1097/HP.0000000000002010, July, 2025.
 - Johnson, B., Byers, K., Patlovich, S.J., Gillum, D. The History of Applied Biosafety: 30 Years in Review. *Applied Biosafety* 2025 30:1, 1-3 doi: 10.1089/apb.2025.0010
 - Fennesy, D., Gutierrez, J.M., Patlovich, S.J., Emery, R.J. Establishing consensus with users of research irradiator devices to facilitate source type replacement. *Health Physics* 128(3):p 222-226, March 2025. doi: 10.1097/HP.0000000000001840
 - Carter, S.R., Casagrande, R., Patlovich, S.J., Gillum, D. Introduction to Applied Biosafety's Second Special Issue on Synthetic Genomics. *Applied Biosafety* 2024 29:3, 121-122 <https://doi.org/10.1089/apb.2024.001>
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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 core institutional missions:**

- Injury and illness rates continue to be among the lowest within the UT System, despite growth in areas such as mental and behavioral health clinical services
- 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 continue to adapt accordingly to support these enterprises

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

FY25 SHERM Annual Report

***Dedicated in loving
memory of Alan Lucas,
Safety Manager of the
Environmental Protection
Program from 2001-2025***



