Volunteer Workers involved in Laboratory Research and Teaching Activities at the University of Delaware

Adopted November 13, 2007

University volunteers are individuals who are uncompensated by the University of Delaware and who perform services directly related to the business of the University to support the research, teaching or public service activities of the University or to gain experience in specific endeavors.

Volunteer workers under the age of 18 will be handled by Minors Involved in Laboratory Research and Teaching Activities Policy, found in Chapter 10 of the University Chemical Hygiene Plan and at http://www.udel.edu/OHS/minorsresearchpolicy.pdf.

Tours and visitors to laboratories are handled under Chapter 10 of the University Chemical Hygiene Plan and are not subject to this policy provided the obligations under the Chemical Hygiene Plan are met.

Under no circumstances shall individuals unable to understand safety training be permitted in University of Delaware laboratories except as research study participants in an approved research protocol

Volunteer workers are permitted to perform research and teaching activities at the University of Delaware provided the following requirements are met:

1) Faculty Members or Principal Investigators must notify the Departmental Safety Committee and receive documented approval from the Chair of the Department or Director of the Program.

2) The volunteer worker must attend all applicable safety training sessions, including but not limited to:
   a. Right-To-Know
   b. Chemical Safety/Hygiene Plan
   c. Any or all of the following, based on work performed:
      i. Corrosive Chemical Safety
      ii. Laboratory Ventilation Safety
      iii. Chemical Waste Disposal
      iv. Laser Safety
      v. Radioactive Materials Safety
      vi. Biosafety
      vii. Bloodborne Pathogens
      viii. X-Ray Device Safety

3) The volunteer worker is under the supervision of a faculty member in the laboratory or area where the work will occur.
4) The responsible researcher must meet with the volunteer worker and review all Job Hazard Analysis (JHA) and Standard Operating Procedures (SOP). Written copies shall be provided. OHS shall review the JHA’s or SOP’s to assure all safety issues are addressed.

5) The volunteer worker must use all required personal protective equipment. Each college, school, department, division or unit should make available to each volunteer required to wear personal protective equipment the devices appropriate for the activity and hazards involved. The volunteer may be required to purchase certain individualized items of personal protective equipment.

6) The volunteer worker must be monitored and supervised by a knowledgeable and experienced adult employee until the principal investigator is comfortable that the volunteer can work independently. They must not work alone while performing hazardous operations or while working with hazardous materials.

7) The volunteer must follow all Departmental and University safety procedures and policies.

8) The Departmental Safety Committee or Departmental Chemical Hygiene Officer should perform spot inspections of the work and assure that all training is complete.

9) The Release of Liability and Waiver Claim Form must be completed by the volunteer worker.

10) The responsible Faculty member must complete the Principal Investigator/Supervisor Commitment Form.
University of Delaware
Volunteer Worker Involved in Laboratory Operations
Release of Liability and Waiver Claim

I, _________________________________, understand that:

(print name of the volunteer worker)

- I am participating in a laboratory program at the University of Delaware and will study, learn or perform research in areas where hazardous substances (chemicals/biological/radioactive, etc.) or physical hazards (very hot or cold temperatures, laser light, electromagnetic frequencies, etc.) are present.

- I understand that I am working in a University of Delaware laboratory science and research program where I may be exposed to or receive an injury from the hazardous materials or hazardous operations that occur in a laboratory. Volunteer workers will be responsible for all costs associated with an exposure or injury while working in the research setting. The University of Delaware is in no way responsible for these expenses.

All participants, including employees, students, volunteers, and visitors, will be informed of the hazards associated with their project(s), and will be trained in safe laboratory work practices.

I understand that the responsible researcher, _______________________________________,

(print the name of the responsible researcher)

is familiar with the project area, will supervise me and may be contacted at

_________________________________________ if I have questions.

(print the office or other contact number)

As an authorized volunteer, I understand that I will be acting on behalf of the University of Delaware, and I will conduct my activities accordingly. I have read and agree to the terms and conditions of my volunteer activities outlined in this policy, and further understand that for my personal safety I must follow all applicable University policies and procedures and the directions of the faculty member/University employee supervising my activities.

Signed: _______________________________ Date:____________________

(volunteer worker)

The completed form, with signature, is to be retained by the laboratory department’s administrative office for a period not less than three years. A copy of the form, with signatures, shall be provided to the volunteer worker. Send a third copy of the completed and signed form to Occupational Health and Safety.
University of Delaware
Volunteer Worker Involved in Laboratory Operations
Principal Investigator/Supervisor Commitment Form

I, _________________________________certify that the volunteer worker named above
(print name)
has been trained in the safe laboratory work practices described in the University of Delaware
Policy on Volunteers Working in Laboratories and will be supervised as required under said
policy.

________________________________________________________________________
Signature                          Date                          Telephone Number

The completed form, with signatures, is to be retained by the laboratory department’s
administrative office. A copy of the form, with signature, shall be provided to the volunteer
worker. Send a third copy of the completed and signed form to Occupational Health and Safety.