Purpose
To provide detailed directions on how to address deficiencies identified during laboratory inspections conducted by the PSC safety manager and/or member departments’ safety committee.

Addressing Required Corrective Actions
Required Corrective Actions must be addressed using the lab inspection tool interface. This interface can be accessed using the following link:

https://labcliq.com/login.cfm

1. Select “Single Sign-on” from the main login page
2. Enter Cornell University email address and click “Login”. This redirects the user to the CUWebLogin page.
3. Enter NetID and password

4. Under “Summary”, click on “Corrective Action”

Corrective Actions will be grouped by Facility.

5. To locate a specific corrective action, click on the Select the next to the appropriate facility and select the room and corresponding inspection date from the drop down menu.

Click on to view pending corrective actions. To mark a corrective action as complete, select the item(s) you are certifying that has been corrected, then click on the Certify Corrective Actions button.
Responding to Corrective Actions Identified by Lab Inspection

Users have the options of entering comments related to action items.

![Comments and Corrective Action Certification](image)

**Note:** In the case of infrastructure or facilities related issues, submission of a ticket request to Facilities will qualify as attempting to correct the required correction action item as long as the ticket request number is included with the Corrective Action Certification web form.

Users also have the option to view the entire report by clicking on the icon or request a time extension by selecting the icon. Two week extensions to correct noted required corrective action items will be granted as long as the request for an extension is received in written format (ie. email, fax, memo). Requests for an extension should be directed to the safety manager.

**Failure to Address Corrective Actions**
The corrective action process has four levels, with ample notification and time given to responsible parties. Failure to correct safety deficiencies and to submit the Corrective Action Certification within the given time period will result in the process moving to the next successive level.

Please note that failure to submit a Corrective Action Certification as part of the inspection process may impact the ability of the faculty member to obtain EH&S signatures or approval for permits, grant certifications or similar items that require EH&S to validate that a faculty member is in compliance with applicable state and federal regulations.

**LEVEL 1**
Upon completion of the laboratory or research area inspection, the Inspection Report will be issued to the faculty member, and/or lab manager responsible for the research area(s). The responsible faculty/staff will be given fourteen (14) days from the inspection date to correct any required corrective action items and to submit the Corrective Action Certification. The PSC Safety Manager will conduct a follow-up inspection within 24-hours of submission of the
Corrective Action Certification. Failure to submit the Corrective Action Certification within the given time period will result in the process moving to Level 2.

**LEVEL 2**

If the Corrective Action Certification is not submitted within fourteen (14) days as noted in Level 1, then a reminder memo/email will be sent to the responsible faculty/staff member and copied to the Department Safety Representative (DSR). The responsible faculty/staff member will be given an additional seven (7) days to correct all required corrective actions and to submit the Corrective Action Certification. The PSC Safety Manager will conduct a follow-up inspection within 24-hours of submission of the Corrective Action Certification. Failure to submit the Corrective Action Certification within seven (7) days will result in the process moving to Level 3.

**LEVEL 3**

If the Corrective Action Certification is not submitted within seven (7) days as noted in Level 2, then a memo/email will be sent to the Department Chair (copied to the responsible faculty/staff member), notifying the Chair that the responsible faculty/staff member will be given a final seven (7) days to correct all noted required corrective actions and to submit the Corrective Action Certification. If necessary a meeting will be scheduled with the responsible faculty/staff member, the Department Chair, the Chair of the Safety Committee and the PSC Safety Manager. in an effort to ensure that all safety deficiencies have been corrected. A follow-up re-inspection will occur.

**LEVEL 4**

At this point, the responsible faculty/staff member has had 28 days to correct noted required corrective action items. If the Corrective Action Certification web form is not submitted within seven (7) days as noted in Level 3, then the names of the responsible faculty/staff members who have not corrected the required corrective action items as part of the inspection process will be included in a report that will be sent to the college/unit administration which will indicate the status of health and safety deficiencies within each department.

Please note that failure to submit a Corrective Action Certification web form as part of the inspection process will impact the ability of the faculty member to obtain EH&S signatures or approval for permits, grant certifications or similar items that require EH&S to validate that a faculty member is in compliance with applicable state and federal regulations.