ORS News2Use

Winter 2015 Issue

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Funding for Natcher Conference Center and Other Facilities Approved

As early as this spring, Natcher will begin the renovation process to transition from an analog system to a digital one. Events Management recently received funding to upgrade Natcher's audio and visual (AV) control production equipment and to make minor updates in Building 31's conference center.

Natcher's current system, equipment and cabling is over 22 years old. This upgrade will occur in two phases to help minimize the disruption to customers. In Phase I, a new lighting control system will be installed in the main auditorium and balconies first. A wireless system will then be installed to reduce cabling and installation costs while ultimately increasing room functionality. This wireless

system will improve sound and image quality and incorporate the following in the main audito-

- A 4K widescreen HD projector
- Central cluster loud speaker system
- 2 95-inch flat panel moni-
- Multi-image processing
- 2 captioned monitors
- Dedicated HD video production system

For an entire month during the summer of 2016. Natcher will be closed for the demolition and clearing of old equipment and installation of the new equipment and cabling. The new equipment and cabling will be assembled and tested offsite and installed once demolition and tact (301) 435 - 2208.

clearing have occurred. Phase II is expected to begin mid-2017, once funds are approved, and will include renovations and upgrades of Conference Rooms A through J.

In addition to Natcher's upgrade, Building 31's Conference Center has received funding to install new sound systems with hearing loops and podiums in conference rooms 6 and 10.

For more information or to schedule a meeting or event with Events Management, con-

New NIH Police Emergency Communications Center Now Open

The newly renovated Emergency Communications Center (ECC) officially opened on February 24.

The Division of Police (DP) recently partnered with PUR-VIS Systems, a technology and communicationsoriented security company. to revamp and modernize its primary ECC located in Building 31. The new "stovepiped" system contains multiple clouds of information

with the capability to share data with other systems using unique user IDs and passwords. The shared data can then be integrated into a video wall so that all users can view the same information simultaneously.

While the primary location was being renovated, staff worked out of the ECC in Building 10. The entire renovation process (continued on back page)...



Photograph of the ECC before the renovation

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Extended Visitor Badges

In September 2014, NIH implemented revised procedures for issuing "Extended Visitor" badges. NIH Extended Visitor badges are issued to individuals affiliated with NIH who need regular and recurring physical access to NIH facilities but who do not require or qualify for a PIV Card (HHS ID Badge) or a Restricted Local Access (RLA) Badge.

An individual applying for an extended visitor credential must now be authorized and sponsored by Administrative Officers (AOs) who have been certified by DPSAC to sponsor federal employees, contractors and affiliates for PIV Cards (HHS ID Badges).

The Institute or Center (IC) will be charged the Fiscal Year 2015 cost of \$21.50 for the fingerprint results if the applicant requires a fingerprint check. New sponsorship forms are posted online at http://security.nih.gov/Pages/Home.aspx to

accommodate these changes.

Please note: sponsorship of non-NIH personnel must include a justification



statement by the sponsoring Administrative Officer as to why the individual requires employee-like access to the NIH campus. This does not affect any patients or patient caregivers' physical access badges. These badges are sponsored by the Clinical Center Hospitality Services Department.

For additional questions on extended visitor badges, please call (301) 435 –

Carbon Monoxide: The Silent Killer

Carbon monoxide (CO) is an odorless, colorless gas produced when fossil fuels such as gasoline, wood, coal, propane, fuel oil or methane burn incompletely. Exposure to CO can induce flu -like symptoms, difficulty breathing and even death depending on several factors such as the victim's age, health status, the concentration of the CO inhaled and length of exposure. As a person is exposed to CO, oxygen is replaced in the blood and a condition known as carboxyhemoglobin saturation results. As the percentage of carboxyhemoglobin in the blood increases so, too, does the likelihood of severe carbon monoxide poisoning.

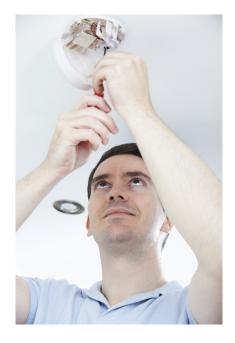
To ensure you and your family are protected from potentially life threatening levels of CO in the home, the following guidelines should be observed:

 Follow manufacturer's instructions regarding the proper maintenance, use and ventilation of heating and cooking equipment. Such equipment typically requires "breathing room" in order to operate safely and efficiently. Periodically check the perimeter of furnaces, water heaters and wood stoves to ensure that air intakes and pilot lights are not obstructed. Chimneys and flues should be cleaned and inspected for cracks and voids each year.

- Always remove vehicles from garages and carports immediately after starting. Similarly, shut off vehicles immediately after parking in enclosed areas. As part of routine maintenance, vehicles should be inspected for exhaust system leaks.
- Always use barbeque grills (charcoal and propane) outside, in well ventilated areas.
- When purchasing new heating and cooking equipment, ensure that the appliance has been tested and approved by an independent testing laboratory, such as Underwriters Laboratories (UL), for use in the intended manner and location.
- Purchase and install home carbon monoxide detectors. Test these detectors at least once a month in accordance with manufacturer's instructions. Ensure that all family members are familiar with the sound of the detector alarm so it will not be confused with an activated household smoke detector. Develop a home evacuation

plan and practice "Exit Drills in the Home" (E.D.I.T.H.) periodically to ensure prompt evacuation in the event of an actual CO emergency.

If you have questions, or would like additional information, please contact the Division of the Fire Marshal, at (301) 496 – 0487.



What to Expect From an OSHA Inspection



If an Occupational Safety and Health Administration (OSHA) compliance officer showed up at your door, would you know what to do?

The inspection might be part of OSHA's programmed inspections, or it could be in response to a complaint. Inspections may fall into one of two categories, depending on the scope of the inspection:

Comprehensive: a substantially complete inspection of the potentially high hazard areas of the establishment.

Partial: an inspection whose focus is limited to certain potentially hazardous areas, operations, conditions or practices at the establishment. A partial in-

spection may be expanded based on information gathered by the inspector during the inspection process.

Inspections are usually conducted without advance notice.

After an opening conference, at which you will be told the purpose of the inspection, the OSHA compliance officer will proceed through the establishment to inspect work areas for

safety or health hazards.

The route and duration of the inspection are determined by the compliance officer. During the inspection, the officer may:

- Observe safety and health conditions and practices
- Consult with employees
- Take instrument readings
- Examine records
- Collect air samples
- Measure noise levels
- Survey existing engineering controls
- Monitor employee exposure to toxic fumes, gases and dusts

For more information or questions about OSHA guidelines, contact the Division of Occupational Health and Safety at (301) 496 – 2960.

S.T.A.R.S.

The Division of Occupational Health and Safety (DOHS) has a new home for its Safe Techniques Advance Research Science (S.T.A.R.S.) "Learn by Doing" laboratory safety training program. Since 2007, the S.T.A.R.S. program has used laboratory space donated by Institutes across campus to teach Summer Internship Program (SIP) students, ages 21 and younger, laboratory safety.

The new teaching laboratory was included in a DOHS renovation at the end of summer 2014 in Building 13, Room 3E60.

The idea behind S.T.A.R.S. is to place students in a lab setting to teach laboratory safety rather than lecture in an auditorium. Small group learning al-



lows young scientists to learn in a more effective and interactive way.

The floor plan of the laboratory allows flexibility in teaching multiple aspects of safety -- chemical, physical and different levels of biological safety.

For more information about S.T.A.R.S. please visit: http://www.ors.od.nih.gov/sr/dohs/Training/Pages/student_labtraining.aspx.



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13th Annual DIS Immigration

The Division of International Services (DIS) will host its Annual Immigration Conference, May 6-7, 2015 at the Natcher Conference Center. This conference is held annually to educate the NIH administrative staff about the recruitment and retention of foreign national scientists in the NIH Visiting Program.

There will be basic and intermediate training sessions available that range from submitting cases to DIS, information on visa classifications and

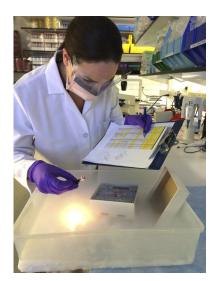
much more. Don't miss this unique opportunity to engage with the DIS staff and network with colleagues at other Institutes and Centers. Registration will open in early April.

For more information, please visit the DIS conference page or contact the DIS office at (301) 496 – 6166.

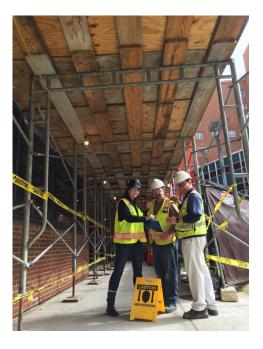


2014 InFocus! Winners

For the last four years, NIH has held the "InFocus! Safe Workplaces for All" photo contest. The contest challenges anyone who is passionate about photography to capture an image of workplace safety or health. The ultimate goal of this contest is to continually reduce personal injuries and illnesses, foster community involvement, inform and emphasize the significance of safety while challenging the creative spirit. The three 2014 InFocus! winners are as follows:



lst Place: Photograph of a scientist taking inventory of biospecimen by Diane Poole and Amanda Vandeveer



2nd Place: Photograph of workers demonstrating hardhat safety by Diane Poole and Amanda Vandeveer



3rd Place: Photograph of a fireman wearing appropriate safety gear by Dale Lewis, Ph.D.

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Helpful Mail Tips

To help minimize confusion and ensure an expedient delivery of your

mail or package, please consider the following:

- Have personal mail sent to your home not your place of work.
- Whenever possible, consolidate outgoing mail that will be sent to the same address. The cost will be lower for one package versus multiple packages or pieces of mail.
- Whenever possible, fold and place correspondence that is less than five pages in regular mailing envelopes instead of flat enve-

lopes (9" x 12"). A 3-ounce letter is 50 cents cheaper than a 3-ounce

- Do not place odd shaped items in envelopes that are not padded. The item could break through during USPS processing and may be damaged and/ or lost.
- Prior to contracting out large mailings, contact the Mail Customer Service Branch (MCSB) for assistance in receiving the best service at a

reasonable cost.

Before adding barcodes to mail, contact the MCSB so that the mail can be tested before it is dis-

- patched to the USPS.
- Capitalize the entire address and avoid using punctuation. The one punctuation exception is the dash between the 5-digit ZIP code and the +4 add-on (e.g. 20892-3333).
- Type or print address information directly onto envelopes, or apply computer-generated labels. This will help eliminate most problems with USPS optical scanning equipment.
- Separate inter-office correspondence, international, and domestic mail prior to placing them into the NIH mail stream.

For more questions or information on other mail related topics, please contact the Division of Mail Management Services at (301) 496 - 3586 or

mcsbcs@mail.nih.gov.

New NIH Police Emergency Communications Center Now Open

(continued from front page)... took approximately 16 months. Although the new ECC in Building 31 is open, the Building 10 location will remain functional and serve as a secondary location.

The ECC is responsible for handling all 911 calls that come from a NIH campus phone, including calls for the Police and Fire Departments. In addition to managing calls, ECC staff monitor alarms and several other security functions on the Bethesda campus as the first line of response for all emergency communications.



Photograph of the ECC after the renovation

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