Laboratory Biorisk Management

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LABORATORY BIODRISK MANAGEMENT **Biosafety AND Biosecurity**



WORKSHOP	CWA 15793 September 2011
IC\$ 07.100.01	Supersedes CWA 15793:2008
Er	nglish version
Laboratory t	biorisk management
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• CWA 15793 (2008, 2011)

ISO standard now under development





Biosafety (adapted from WHO/CDS/EPR/2006.6)

 Containment principles, technologies, and practices that are implemented to prevent the unintentional exposure to biological agents and toxins, or their accidental release

Biosecurity (adapted from WHO/CDS/EPR/2006.6)

 Protection, control, and accountability for biological agents and toxins within laboratories in order to prevent their loss, theft, misuse, diversion of, unauthorized access, or intentional unauthorized release

Biorisk (adapted from ISO/IEC Guide 51:1999)

• Combination of the probability of occurrence of harm and the severity of that harm where the source of harm is a biological agent or toxin



Biosafety, Biosecurity...



<u>Biosafety</u>

- Engineering Controls (i.e. biosafety cabinets, directional airflow, anterooms)
- Good laboratory work practices (i.e. hand washing, spill clean-up)
- Personal Protective Equipment (PPE)
- Practices and Procedures

- Access control
- Personnel
 management
- Inventory of biological hazards
- Proper decontamination/ disposal of waste materials
- Proper shipping procedures

- Doors with locks
- Password/PIN

Biosecurity

- Card readers
- Biometric (i.e. fingerprints)
- Cameras
- Information security
- Security guards
- Fences
- Bars on windows
- Magnetic locks
- Magnetic switches on doors
- Alarms



Agent Risk Groups

RG 1

RG 2

RG 3

RG 4

Agents that are not associated with disease in healthy adult humans Agents that are associated with human disease which is rarely serious and for which preventive or therapeutic interventions are often available Agents that are associated with serious or lethal human disease for which preventive or therapeutic interventions *may be* available (high individual risk but low community risk)

Agents that are likely to cause serious or lethal human disease for which preventive or therapeutic interventions are *not usually* available (high individual risk and high community risk)





Laboratory Biorisk Management

- Depth of roles and responsibilities
- Intellectually sound, evidence-based decision making
- Substantive risk assessments based on unique operations
- Risk-based control measures
- Constant effectiveness evaluation
- Explicitly scalable



The AMP Model





I. Assessment





Are the Risks the Same?

wildtigerwatch.blogspot.com

Should the Mitigation Measures Be the Same?

pixshark.com

 Image: Market in the second second



II. Mitigation

 Mitigation measures should be drawn directly from the risk assessment, and should target the most unacceptable risks



II. Mitigation

 Mitigation measures should be drawn directly from the risk assessment, and should target the most unacceptable risks





III. Performance

III. Performance **Identify the Key Issues of Concern Evaluate and Refine Define OUTCOME** Performance Indicators and Indicators **Metrics Act on Findings Define ACTIVITIES** from Performance **Indicators and** Indicators **Metrics Collect Data and** OECD Environment **Report Indicator Directorate Results** 2008



Nebraska's Ebola Patient-Specific PPE Checklists



PPE Donning and Doffing

Ebola Patients

These are standard Nebraska Biocontainment Unit Personal Protective Equipment procedures. These are developed to protect against Category A agents. Therefore, they vary slightly from CDC recommendations.



nebraskamed.com



GBRMC





Global Biorisk Management Curriculum (GBRMC)

Catalog of Courses



- Measurement and Analysis of Biorisk Management System Performance
- Conducting Audits and Inspectors to Assess Borisk Management Performance
- B Revising and Improving a Biorisk Management System based on Performance Reads
- Catablehing and Using Performance Indicators
- Chills, audits, and impections (lablevel)

- Orientation to biorisk monogement
- **Bioefrics**
- Dual-use and responsible conduct of research
- Writing and communicating biorisk management policy
 - Catabilishing and communicating BRM.roles, rasponsibilities, objectives, and goals
 - Beveloping, conducting, and maintaining. a hazard invertory
 - Identifying lagel requirements that impact BRM.

Introduction to Incident Monagement A Response

- · Incident recognition and response in the loboratory
- · Drills, audits, and impections [ab-leve]
- Incident Response & Investigation
- Incident Response Evaluation
- & improvement

GBRMC Courses

Beview & Revis

(by CWA 15793 Domain)

Bioschety Rok Assessment Bosecutty Rok Assessment Work Program Raviaw and Approval

Bik mitigation strategies

- · Developing, evoluting, volidating, and communicating standard operating procedures.
- · Foolity features
- · Engineering Controls and Equipment
- · Good laboratory practices
- · Personal protective equipment
- · Shipping Infectious Substances and **Biological Specimers**
 - Understanding and materializing facilities. & sequipment for biorisk management
 - Basic features & maintenance for physical and information security measures
 - · Field bioexcarity
 - · Deconterningtion
 - Bosecurity

Basic Biorisk Management Track · Disposel

Lob-Level Track

Monogement & Leodership Track

- Human Performance for Biariak Management in the Laboratory
- Enboratory level hazard and risk communication
- Cleveloping, evoluting, solidating, and communicating standard operating procedures
- Cleveloping, implementing, and evaluating training and other methods to assure BRM competence
- Coveloping roles & responsibilities for riskbosed access to and accountability for biological ogents and taxins
- Establishing and maintaining formal and informal BRM mentaring programs.
- Managing human performance in the BDM workforce
- Establishing and maintaining Worker Health Programs

Risk Characterization & Evaluation Incident Response Manning and Properation

Administrative Controls





Trainers with Access*

- Algeria
- Argentina
- Armenia
- Australia
- Azerbaijan
- Belgium
- Brazil
- Cameroon
- Canada
- Cote D'Ivorie
- DRC
- Egypt
- Ethiopia
- Georgia
- Hong Kong
- India

- Indonesia
- Iran
- Iraq
- Jordan
- Kazakhstan
- Kenya
- Kyrgyzstan
- Malaysia
- Mexico
- Mongolia
- Morocco
- Mozambique
 - Nigeria
- Peru
- Philippines
- Russia
 - Rwanda

- Saudi Arabia
- Singapore
- South Africa
- Swaziland
- Tajikistan
- Tanzania
- Trinidad & Tobago
- Uganda
- Ukraine
- UK
- USA
- Uzbekistan
- Vietnam
- Yemen
- Zambia
- Zimbabwe

*TDP or Trainers' Orientation (49)



Risk Assessment



Risk Assessment Definitions

Hazard

• Something that has potential to do harm

Threat

 Someone who has potential to do harm using a specific hazard

Risk

 In an event involving a specific hazard and/or threat, the likelihood and consequences of a particular outcome



Risk: What Can Go Wrong?



Consequences



Many different ways to assess risk.

But it needs to be

- Structured,
- Repeatable, and
- Documented.

And it needs to acknowledge that any activity has many, many risks.

The real value in a risk assessment is in comparing risks against each other, and prioritizing some risks over others.

Biosafety RAM



Safety risks based on routes of exposure

- Inhalation
- Ingestion
- Contact
- Percutaneous

Agent properties

Activity-specific procedures

Activity-specific mitigation measures





Biosafety RAM Structure

Factors that may increase the likelihood of an exposure and an infection, and the consequences of an infection



Properties of Agent and Laboratory Procedures

Implemented Biosafety Measures



Factors that reduce the likelihood of exposure or the consequences of infection

🛓 🦳 Risk Assessmen	t Model 🛛 🗕 🗖 🗙	
File Settings		
Preliminary Information Enter Data View Results Model Structure		
Select a module		
Biosafety		
Answer module's question set		-
Saved response sets	✓ Create new Delete selected	
Edit Responses		
Inhalation Is this agent known to cause infection via inhalation droplet nuclei that have entered the upper or lower 4 = Preferred Route 2 = A possible route	in humans (to cause infection via droplets or respiratory tract) in a laboratory setting?	Answers captured as numerical values ranging from zero to four
1 = Unknown $0 = Not a route$ Is the infectious dose (ID50) of this agent for this route $4 = Yes$ $2 = No$ $0 = If this is not an infectious route$	oute less than 1000 or unknown in humans?	
Percutaneous Is this agent known to cause infection via percutane through compromised skin or direct injection into th 4 = Preferred Route 2 = A possible route 1 = Unknown 0 = Not a route	Questions or that influence exposure, like infection, imp	ganized by factors e likelihood of an elihood of an olementation of
Response Enter Response	set name mitigation m	easures, and

to a human and/or animal host

٨

File Settings

Risk Assessment Model

Preliminary Information Enter Data View Results Model Structure

LIKELIHOOD:

Likelihood = V(Agent Properties*Impact of Biosafety)

GEOMEAN used due to interdependence between what we are working with and how we are safeguarding it

Agent Properties = $\sum (Weight of agent factor, score of agent factor)$

Impact of biosafety = $\sum(Weight)$ of biosafety factor, score of biosafety factor)/4)*Biosafety Weight



🔜 Results Summary

File Default Charts



1.215026: Likelihood Ingestion Individual	[Result Summary	Qu	estion Im	pact
1.384793: Likelihood Inhalation Individual		Cumulative Wei		Relative	eWe
1.215026: Likelihood Ingestion Individual 1.384793: Likelihood Inhalation Individual 1.020763: Likelihood Percutaneous Individual 1.461339: Likelihood Contact Individual 0.350138: Likelihood Ingestion Community 2.456538: Likelihood Inhalation Community 1.275875: Likelihood Percutaneous Community 1.431025: Likelihood Contact Community 0.388443: Likelihood Ingestion Animal 1.553651: Likelihood Inhalation Animal 2.083496: Likelihood Percutaneous Animal 0.936826: Likelihood Contact Animal		Result Summary Cumulative Wei 0.8 0.246 0.2214 0.2 0.162 0.1476 0.135 0.102 0.102 0.102 0.102 0.102 0.0902 0.083804	Qu	Relative	pact
0.936826: Likelihood Contact Animal 0.349362: Consequence of Disease to Humans 1.293775: Secondary Consequence of Disease t 0.85176: Consequence of Disease to Animals 1.24215: Secondary Consequence of Disease to 0.36683: Consequence of Disease to the Commu 1.782753: Likelihood of Secondary Transmission 1.608731: Likelihood of Secondary Transmission		0.0902 0.083804 0.07425 0.07425 0.07425 0.07425 0.045 0.045 0.030996 0.03 0.03 0.03 0.03 0.03 0.03			
		0.00594 0.00528 0.00336 0.00264 0.00264 0.00264 0.00204 0.00192 0.00198 0.00096		1	

<

	Question	
	Is this agent know Are aerosolization What is the potent Is the infectious do Is respiratory prote What is the potent Does this laborato Are Biosafety cabi Is all the equipmer Are other forms of What is the implem "hat type of mate animals house A nimals handle A imals transp Do	In to cause infection via inhalation in humans (t experiments being conducted as part of this pri- ial for aerosols to be generated as a byproduct ose (ID50) of this agent for this route less than ction used in this procedure? (surgical masks a ial and extent of a splash or spill in this procedu- ry have procedures in place for agent handling nets used in this procedure? It used in this procedure? the used in this procedure? The procedure with a potential to gen Primary Containment used in this procedure? hented process for the decontamination of equi- rial will be used in this procedure? (If the proce d in a manner that is isolated or sealed to preve ed in isolation to prevent aerosol escape (e.g. ir orted in a manner that prevents aerosol escape by have animal handling procedures in place to
(Risk	e of these animals?
	drivers	plume of material existing at one time in the he species of animal in use in the laboratory ave the potential to shed infectious particles
	Hon	do the laboratory animals used in this procedur
	Does the institution	n have defined roles and responsibilities for bio:
	Does the institution	n periodically review the biosafety program?

Relative Weight

>

Are there procedures in place for preventative equipment mainter Does the institution have comprehensive biosafety documentatio Does the institution conduct biosafety drills or exercises?

Are there standard operating procedures in place for unexpected Does this laboratory implement standard good laboratory practice Is there a formal personal protective equipment (PPE) program in Is there a shipping and receiving program in place at this laborate Are all biological agents in this laboratory inventoried?



Biosecurity RAM

Security risks based on the motives, means, and opportunities of the threats

- Insider
- Outsider

Agent properties

Activity-specific procedures

Activity-specific mitigation measures





Biosecurity RAM Structure

Factors that may increase the likelihood of successful malicious use, and the consequences of malicious use



Properties of Agent and Laboratory Procedures Implemented Biosecurity Measures

> Factors that reduce the likelihood of successful malicious use



agent, and consequences of misuse based upon the agent

<u>S</u>	Risk Assessment Model	
File Settings		
Preliminary Information Enter Data View Results Mo	del Structure	
Select a module		
Facility Agent		
- Agent		
Answer module's question set		
Saved response sets		✓ Create new Delete selected
Agent Potential		
		Answers captured as
Likelihood of theft from fa	acility	numerical values ranging
Detential of Eacility to b	o Tourotod	from zero to four
Potential of Facility to b	e Targeled	
Does this agent exist in nature?		
4 = Agent does not exist in nature		
3 = Agent has very limited natural	sources	
1 = Agent exists in the environme	nt in the country	
0 = Agent exists in the environme	nt with a global distribution	
Can this agent be isolated from the e	nvironment?	
4 = Isolation from nature is not fe	asible	
3 = Isolation from nature requires 1 = Experienced technician require	advanced technical skills	s organized by factors
0 = Isolation of viable, virulent ag	ent from nature is trivial	is organized by labters
What is the level of availability of this	agent in other laboratories that influe	ence the capabilities and
4 = Agent not in other labs in cou	ntry and is only found in ve	the educate and the
<	Intent of	the adversary and the
Response Enter	security	profile of the facility
	Security	prome of the facility
	(Physical	Personnel Inventory

Transport, Cyber, Management)

Risk Assessment Model

LIKELIHOOD:

Likelihood = V(Agent Properties*Impact of Biosecurity)

File Settings

GEOMEAN used due to interdependence between what we are working with and how we are securing it

Agent Properties = $\sum(Weight \ of \ agent$ factor, score of agent factor)

Impact of biosafety =
∑(Weight of biosecurity
factor, score of
biosecurity factor)/
4)*Biosecurity Weight



Consequences = Agent properties * Consequence mitigation measures





Figure 1: Risks posed by Nipha Virus prior to any implementation of Mitigation Measures

After mitigation

Before mitigation



Figure 2 Risks posed by Nipah virus post implementation of procedural, engineering, and ppe control measures



Question	Response Suggestions	Normal Operation Score	Spill (and original SOP)	Cleanup with updated SOP
	Likelihood of Exposure			
Po	tential of Exposure from Laboratory Proces	ses		
Type of Material				
What type of material will be used in this procedure? (If the procedure will have both purified material and diagnostic samples, select the purified material option)	4 = Purified biological materials 2 = Diagnostic samples (e.g. blood, urine, tissue, saliva, etc) 1 = Environmental samples (e.g. soil, water, etc)	4.0	4	4
What is the greatest volume of material existing at one time in the procedure?	4 = Over 10 liters 2 = Up to 10 liters 1 = Milliliter volume	4.0	4	4
Inhalation Exposure				
What is the potential for aerosols to be generated as a byproduct of this procedure (e.g. pipetting, sonication, etc.)?	 4 = A notable potential for the generation of aerosols may be produced 1 = A limited quantity of aerosols may be produced 0 = No procedures in use which may generate an aerosol 	2.0	4	2
Are aerosolization experiments being conducted as part of this procedure?	4 = Large scale aerosolization experiments are being performed 3 = Small scale aerosolization experiments are being performed 0 = No aerosol experiments are being performed	2.0	4	4
Percutaneous Exposure				
What is the amount of sharps used in this procedure?	 4 = A large volume of sharps in use (e.g. scalpels or needles in use at least daily in this procedure) 3 = A small volume of sharps in use (e.g. scalpels or needles rarely used for this procedure) 0 = There are no sharps in use 	1.0	1	1
What is the amount of breakable material or items with sharp edges in this laboratory?	 4 = A large amount of breakable material (e.g. glassware common in laboratory) 3 = A small amount of breakable material 0 = There is no breakable material in the laboratory 	1.0	1	1
Decontamination				
What is the implemented process for the decontamination of equipment prior to maintenance?	 4 = There is no decontamination of equipment prior to maintenance or repair 3 = Decontamination of equipment prior to maintenance or repair is performed, but not validated 0 = No equipment is maintained or repaired without decontamination, and the process is documented and validated 	2.0	2	2



BIORAMI: FIU VACCINE Produc		ــــــاد		
Question	Response Suggestions	Normal Operation Score	Spill (and original SOP)	Cleanup with updated SOP
	Likelihood of Infection			
	Transmissibility			
	Humans			
Inhalation				
Is this agent known to cause infection via inhalation in humans (to cause infection via droplets or droplet nuclei that have entered the upper or lower respiratory tract) in a laboratory setting?	4 = Preferred Route 2 = A possible route 1 = Unknown 0 = Not a route	4.0	4	4
Is the infectious dose (ID50) of this agent for this route less than 1000 or unknown in humans?	$\begin{array}{l} 4 = Yes \\ 2 = No \\ 0 = If this is not an infectious route \end{array}$	4.0	4	4
Percutaneous				
Is this agent known to cause infection via percutaneous exposure in humans (to cause infection through compromised skin or direct injection into the blood stream) in a laboratory setting?	4 = Preferred Route 2 = A possible route 1 = Unknown 0 = Not a route	0.0	0	0
Is the infectious dose (ID50) of this agent for this route less than 1000 or unknown in humans?	$\begin{array}{l} 4 = Yes \\ 2 = No \\ 0 = If this is not an infectious route \end{array}$	0.0	0	0
Direct Contact				
Is this agent known to cause infection via direct contact in humans (to cause infection through the mucosal membranes) in a laboratory setting?	4 = Preferred Route 2 = A possible route 1 = Unknown 0 = Not a route	4.0	4	4
Is the infectious dose (ID50) of this agent for this route less than 1000 or unknown in humans?	$\begin{array}{l} 4 = Yes \\ 2 = No \\ 0 = If this is not an infectious route \end{array}$	4.0	4	4
Ingestion				
is this agent known to cause infection via ingestion in humans (to cause infection via contact with the gastrointestinal tract) in a aboratory setting?	4 = Preferred Route 2 = A possible route 1 = Unknown 0 = Not a route	4.0	4	4
Is the infectious dose (ID50) of this agent for this route less than 1000 or unknown in humans?		4.0	4	4



Question	Response Suggestions	Normal Operation	Spill (and original	Cleanup with
		Score	SOP)	SOP
	Main Category: Mitigation Measures			
Standard Procedures				
Are all biological agents in this laboratory inventoried?	 0 = There is no inventory system at this laboratory 1 = This laboratory has a limited inventory system 4 = This laboratory has a complete and well-maintained inventory system 	3.0	3	3
Is there a shipping and receiving program in place at this laboratory?	0 = There is no shipping and receiving program at this laboratory 1 = This laboratory has limited procedures in place for shipping and receiving 2 = This laboratory has some procedures in place for shipping and receiving, but lacks oversight in implementation 4 = This laboratory has an active shipping and receiving program, and well-defined procedures and plans in place	4.0	4	4
Are there procedures in place for preventative equipment maintenance to reduce/eliminate accidents or equipment failure, which meet defined best practices? These would include equipment calibration, validation, certification, etc.	 0 = There is no equipment maintenance program at this laboratory 1 = This laboratory has limited procedures in place for equipment maintenance, but maintenance is generally reactive rather than preventative 2 = This laboratory has some procedures in place for maintenance, but lacks oversight in implementation 4 = This laboratory has an active preventative equipment maintenance program, and well-defined procedures and plans in place 	2.0	2	2
Are there standard operating procedures in place for unexpected or catastrophic incidents, including the release of or exposure to an infectious agent (e.g. Incident response plans)?	0 = There is no incident response program at this laboratory 1 = This laboratory has limited procedures in place for incident response, but maintenance is generally reactive rather than preventative 2 = This laboratory has some procedures in place for incident response, but lacks oversight in implementation 4 = This laboratory has an active incident response program, and well-defined procedures and plans in place	2.0	2	2
Is there a formal personal protective equipment (PPE) program in place?	0 = There is no PPE program at this laboratory 1 = This laboratory has a limited PPE program in place 2 = This laboratory has some procedures in place for PPE, but lacks oversight in	1.0	1	3



Question	Response Suggestions	Normal Operation Score	Spill (and original SOP)	Cleanup with updated SOP
	Main Category: Consequence			
Consequence of Disease to Huma	ns			
Agent Characteristics				
Does this agent or one of its by- products cause a carcinogenic or mutagenic reaction in a human host?	4 = Yes 2 = Unknown 0 = No	0.0	0	0
Does this agent have toxin or enzyme production which has a negative impact in a healthy human host?	$ \begin{array}{l} 4 = Yes \\ 2 = Unknown \\ 0 = No \end{array} $	0.0	4	4
Does this agent suppress a human host's immune system? (E.g. cause dramatic suppression which renders the host unable to respond to other infections)	4 = Yes 2 = Unknown 0 = No	1.0	4	4
Does this agent have the ability to alter once in a host or in the natural environment to become infectious through new route or new hosts, or to cause increased consequences?	4 = Yes 2 = Unknown 0 = No	4.0	4	4
Morbidity				
What is the duration of illness (the average length of time of clinical signs of infection) in a normally healthy human host?	4 = long duration (months or more) 3 = moderate duration (week(s)) 1 = short duration (days) 0 = No signs of infection	3.0	3	3
What is the severity of illness (the average severity of illness, ranging from no signs of illness to hospitalized in critical condition) in a normal health human host?	 4 = Extreme sign of disease (mechanical assistance required to sustain life or death imminent) 3 = High sign of disease (not able to function (hospitalized)) 2 = Moderate sign of disease (able to function in a limited manner (bed rest)) 1 = Low sign of disease (able to function but showing symptoms) 0 = No sign of disease 	2.0	2	2
What is the duration of infection (the length of time the host is infected with the organism) in a normal healthy human host?	 4 = Infection present for life of host 3 = Infection present post clinical signs for months 2 = Infection present post clinical signs for weeks 1 = Infection present if clinical signs 0 = No sign of disease 	2.0	2	2
Does this disease cause any long- term conditions (sequelae) in a normal healthy human host?	4 = High long-term impact which renders the host unable to function normally 2 = Moderate long-term impact which	0.0	0	0

Normal Operation



🛃 Risk Assessment Model		×
File Settings		_
Preliminary Information Enter Data View Resu	sults Model Structure	
Select response sets to view	Graphed Tabulated	
(use shift or ctri for multiple selections)	Biosafety Risk to Individuals in the Laboratory and to the	
-Biosafety	Community	
Flu Vaccine (spil 1)	4.00 Very High	
Flu Vaccine (spill 2)	375-	
	0.00	
	3.50 -	
	3.25	
	3.00	
	2.75	
	2.50 -	
	2.25	
	000	
	1.75	
	1.50	
	1.25	
	1.00	
	0.75 -	
	0.50 -	
	0.25	
	Very Low	
	0.00 0.25 0.50 0.75 1.00 1.25 1.50 1.75 2.00 2.25 2.50 2.75 3.00 3.25 3.50 3.75	5 4.00
	Consequence	
	Inhalation Risk to Individual • Percutaneous Risk to Individual Contact Risk to Individual	
	 Ingestion Risk to Individual Inhalation Risk to Community Percutaneous Risk to Communit 	y
	 Contact Risk to Community Ingestion Risk to Community Secondary Transmission Risk 	
	Select chart Biosafety Risk to Individuals in the Laboratory and to the Community	rt
	Select data points to show (use shift or ctrl for multiple selections)	
	Inhalation Risk to Individual Percutaneous Risk to Individual	
	Contact Risk to Individual	
	Ingestion Risk to Individual	E
	Percutaneous Risk to Community	
	Contact Risk to Community	
	Ingestion Risk to Community Secondary Transmission Risk	-
ر الــــــــــــــــــــــــــــــــــــ	OCCUPACIENT TRANSIONERIAS	

Spill (and original Clean up procedure)



🍰 Risk Assessment Model	
File Settings	
Preliminary Information Enter Data View R	esults Model Structure
Select response sets to view	Graphed Tabulated
(use shift or ctrl for multiple selections)	Biosafety Risk to Individuals in the Laboratory and to the
-Biosafety -Elix Vaccine	Community
Flu Vaccine (spil 1)	4.00 Low Moderate High Very High
Flu Vaccine (spill 2)	3.75 -
	3.50
	3.25
	3.00
	2.75
	240
	2.00
	B 2.25
	³ _{1.75}
	150
	1.25
	1.00
	0.75
	0.50
	0.25
	Very Low
	0.00 0.25 0.50 0.75 1.00 1.25 1.50 1.75 2.00 2.25 2.50 2.75 3.00 3.25 3.50 3.75 4.00
	Consequence
	Inhalation Risk to Individual • Percutaneous Risk to Individual ▲ Contact Risk to Individual
	 Ingestion Risk to Individual = Inhalation Risk to Community T Percutaneous Risk to Community
	Contact Risk to Community ► Ingestion Risk to Community ■ Secondary Transmission Risk
	Select chart Biosafety Risk to Individuals in the Laboratory and to the Community
	Select data points to show (use shift or ctrl for multiple selections)
	Inhalation Risk to Individual
	Contact Risk to Individual
	Ingestion Risk to Individual Inhalation Risk to Community
	Percutaneous Risk to Community
	Contact Risk to Community
	Secondary Transmission Risk
	1

Spill clean-up with new procedure



🗐 Risk Assessment Model	
File Settings	
Preliminary Information Enter Data View Re	sults Model Structure
Select response sets to view (use shift or ctrl for multiple selections)	Graphed Tabulated
	Biosafety Risk to Individuals in the Laboratory and to the
Flu Vaccine	Community
Flu Vaccine (spil 1)	4.00 Low Moderate High Vey High
Flu Vaccine (spill 2)	375
	3.50
	3.25
	3.00 -
	2.75
	2.50
	D 2.20
	2.00
	1.75
	1.50 ·
	1.25
	1.00
	0.75 -
	0.50 -
	0.25 1
	Very Low
	0.00 0.25 0.50 0.75 1.00 1.25 1.50 1.75 2.00 2.25 2.50 2.75 3.00 3.25 3.50 3.75 4.00
	Consequence
	Inhalation Risk to Individual • Percutaneous Risk to Individual Contact Risk to Individual
	 Ingestion Risk to Individual = Inhalation Risk to Community
	Contact Risk to Community Ingestion Risk to Community Secondary Transmission Risk
	Select chart Biosafety Risk to Individuals in the Laboratory and to the Community
	Select data points to show (use shift or ctrl for multiple selections)
	Inhalation Risk to Individual
	Percutaneous Risk to Individual Contact Risk to Individual
	Ingestion Risk to Individual
	Inhalation Risk to Community
	Percutaneous Risk to Community Contact Risk to Community
	Ingestion Risk to Community
	Secondar v Transmission Risk

Risk Comparison

Original Procedures



Revised Procedures





Changes in Risk Over Time

Risk level if a spill occurs

Risk level during normal procedures Risk level during clean-up based upon revised procedures

Risk level during clean-up based upon current procedures





Conclusion

• Tremendous value in a structured, repeatable, and documented risk assessment.



 Such a method can be applied to any facility, in any country, regardless of nature of work or available resources.



- Such a method can be applied to any facility, in any country, regardless of nature of work or available resources.
- Biorisk management integrates
 - activity-specific risk assessments,
 - activity-specific mitigation measures, and
 - activity-specific performance evaluations.

Thank you.