VA Ann Arbor Healthcare System
Research Service (151)

RENEWAL PACKET
WOC Employee
(Without Compensation)

Update - November 2015
[Added NEW Scope of Practice Form]

ORANGEBOOK Checklist for Successful Completion of Annual WOC Packet – October 2015		
	(Everyone)	**Submit SF-87 Worksheet** *(2013 version)* [see page 5] (needed for PIV Card application) **Please deliver to the Research Office with "Orange Book"**
	Complete every 365 days (Everyone)	**1) VA Privacy and Information Security Awareness and Rules of Behavior** **2) Privacy and HIPAA Training** **3) Infection Control: Bloodborne Pathogens and Tuberculosis** => **https://www.tms.va.gov/plateau/user/login.jsp** [see pages 2-4]
	Complete (Everyone)	**Research Credentialing Verification** [see pages 6, 7] (Print Form; supervisor must sign)
	Complete (lab workers only)	**Research Employee Safety Training Checklist (Lab Workers)** [see page 10] (Print Form; supervisor must sign)
	Complete every 2 years (*If you participate in Human Studies)*	**Human Subjects Research Training Requirements** [see page 11] = > https://www.citiprogram.org
	WOC Complete every year	**Scope of Practice Form (VA Human Studies Research)** [see page 13] [Print Form; supervisor must sign]
	Animal Studies workers ---------- **WOC Complete every year** ---------- WOC Complete every year	**Animal Studies Training** [must complete every two years] = > https://www.citiprogram.org [Print Certificate] ---------- - **Occupational Health & Safety Survey (Lab Animal Contact)** [see page 17] [Print Certificate] ---------- **Scope of Practice Form (VA Animal Studies / Lab Research)** [see page 13] [Print Form; Supervisor must sign]
	WOC Complete every year	**VHA Handbook 6500, "National Rules of Behavior"** [see pages 18-25]
	WOC Complete every year	**Assignment of Functional Categories** [see pages 28-29]

When you have completed all these forms and education modules, please print your training certificates and bring all appropriate forms and certificates to the Research Office to Christina Wayne . *If you have any questions, please feel free to contact us.*

a. *R&D Coordinator: Leonard Cooke at 845-5602*
b. *Human Studies Coordinators: Cathy Kaczmarek & Terry Robinson at 845-3440*
c. *Animal Studies + Research Safety Coordinator: Carolyn Slusher at 222-7981*
d. *Research WOC Coordinator: Christina Wayne at 845-5600*

Call Christina Wayne at 734-845-5600 to schedule an appointment for in-processing.

ALL PAGES MUST BE SUBMITTED AS SINGLE-SIDED COPIES

VALU
VA LEARNING UNIVERSITY

Dear WOC Research Employee,

To continue working as a Without Compensation Research Employee with the Department of Veterans Affairs – VA Ann Arbor Healthcare System, you are required to complete three mandatory training programs titled:

1) *VA Privacy and Information Security Awareness Training and Rules of Behavior* (annually)
2) Privacy and HIPAA Training (annually)
3) Infection Control: Bloodborne Pathogens and Tuberculosis (annually)

These trainings are offered through the VA Talent Management System (TMS), a system that offers web-based training to VA employees and its partners.

FOR PERSONS ALREADY REGISTERED IN TMS
If you are already registered in TMS and have taken courses in the past, you do not need to register again. You will be notified of courses you must complete through e-mail communication.

FOR PERSONS NOT REGISTERED IN TMS
You must self-enroll for a profile on the VA TMS by visiting https://www.tms.va.gov/plateau/user/login.jsp. Once there, you should follow the steps below to create a profile, launch the mandatory training, and complete the content prior to your next day at VA. You will need to assign the Bloodborne Pathogens Training to your Learning Plan after validation of your account by the Research Office. This can be done by searching the CATALOG box in the upper right hand corner of the TMS Home Page.

Upon completion, you should provide your printed certificate of completion from the TMS while in processing for your WOC Appointment. This certificate displays your TMS User ID.

Managed Self-Enrollment (MSE) enhances VA's training and reporting compliance, and is another step toward establishing VA as a 21st century organization built on providing the best care and service possible for our Veterans!

Sincerely,

Leonard Cooke
Staff Assistant, Research Service

1.1 Step-by-Step Instructions

1. From a computer, launch a web browser and navigate to https://www.tms.va.gov/plateau/user/login.jsp
2. Click the [**Create New User**] link in the menu below the "TMS" logo and login fields
3. Select the radio button for "**WOC**"
4. Click the [**Next**] button
5. Enter appropriate information in each required field, and also in any non-required field if you have the information
    a. My Account Information:
        i. Create **Password** (Follow the guidelines presented on screen)
        ii. Re-enter **Password**
        iii. **Security Question**
        iv. **Security Answer**
        v. Re-enter **Security Answer**
        vi. **Social Security Number** (Your SSN is used only as a unique identifier in the system to ensure users do not create multiple profiles. The SSN is stored in a Private Data Table that cannot be accessed anywhere via the VA TMS interface. It is securely transferred to a VA database table inside the VA firewall where it can be confirmed, if necessary, by appropriately vested system administrators and/or Help Desk staff.)
        vii. Re-enter **Social Security Number**
        viii. **Date of Birth**
        ix. **Legal First Name**
        x. **Legal Last Name**
        xi. **eMail Address** (Enter your business or personal email address. If you have a VA email address assigned to you, it is preferred. The eMail Address will be used as your UserID)
        xii. Re-enter **eMail Address**
        xiii. **Phone Number** – Enter a number where you can be reached by VA staff if issues arise with this self-enrollment process or in other circumstances)
    b. My Job Information
        i. **VA City** – Enter "**Ann Arbor**"
        ii. **VA State** – Select from the list
        iii. **VA Location Code** – Select **ANN** from the list
        iv. **VA Point of Contact First Name** – Enter Catherine
        v. **VA Point of Contact Last Name** – Enter Kaczmarek
        vi. **VA Point of Contact eMail Address** – Enter catherine.kaczmarek@va.gov
        vii. **VA Point of Contact Phone Number** – Enter 734-845-3439
        viii. If you have a requirement to take HIPAA Training, check the **HIPPA Training Required** check box

Once you have entered all of the necessary data, click on the "**Submit**" button. Your profile will be immediately created. Copy and save the **UserID** displayed to you on the confirmation page, as you will need this for future logons to the VA TMS. Once done, click on the "**Continue**"

button and wait until your "**To-Do List**" populates with the title(s) of the mandatory training content.

1.2 Launching and Completing the Content

1. Mouse over the title of the available Item in the **To-Do List**
2. Click the [**Go to Content**] button in the pop-up window that appears.
3. Complete the content following the on-screen instructions.
4. When you have completed the Rules of Behavior, print that out and save it.
5. Exit the course and a completion should be recorded for your effort.
6. Click on the "Completed Work" pod on the lower right hand side of your internet browser window.
7. Move your mouse over the title of the course you just completed and choose to "Print Completion Certificate".
8. Print off your completion certificate and save it with your signed Rules of Behavior.
9. When you report to VA, bring both the signed Rules of Behavior and the Certificate of Completion for your mandatory training for verification by VA personnel.

1.3 Trouble-shooting and Assistance

The Check System link on the VA TMS is an automated tool that confirms the existence of basic, required software on the computer you are using to complete this training. If one is not in compliance with the requirements, a red "x' will appear next to the Check System link. Should this be the case with your computer, please follow the instructions to bring your computer up to the standards that will work with the VA TMS.

If you do not have a Social Security Number, or if you experience any difficulty creating a profile or completing the mandatory content, contact the VA MSE Help Desk at 1.888.501.4917 or via email at VAMSEHelp@gpworldwide.com.

SF – 87 WORK SHEET

PLEASE PRINT LEGIBLY

Name:	**FIRST:**_____ **Full Middle Name:**_____ **or** **Only Have Middle Initial:** _____ **or** **No Middle Name (Indicate / NMN) :** _____ **LAST:**_____
Other Names Used: (Maiden Name) and/or (Aliases) AKA or Nicknames:	
Social Security Number:	
Date of Birth:	
Race / Ethnicity:	
Gender:	
Height:	**Feet:** _____ **Inches:**_____
Weight:	_____**Lbs.**
Place of Birth:	**City:** _____**State:**_____ **OR** **Country:**_____
Hair Color:	
Eye Color:	
Current Address:	**Address # & Street:**_____ **City:** _____ **State:** _____ **Zip:**_____
Citizenship: (US/other)	
Job Title or Affiliation:	**VA Employee Title:**_____ **Supervisor:**_____ **PIV Re-Issuance:**_____**Y or N if applicable** **Do you need VA computer access** _____ **Y or N**

Have you been fingerprinted within the last 6 months at this VA facility? Yes ___ No ___

May 10, 2007

Requirement for credentialing of all research staff

This requirement applies to all research staff including those that are compensated by the VA, those that are appointed as Without Compensation (WOC), and those appointed by the Intergovernmental Personnel Act Mobility Program (IPA). The staff may be full time, part time, or fee basis.

Credentialing

Credentialing is the systematic process of screening and evaluating qualifications and other credentials, including licensure, registration, certification, required education, relevant training and experience, and current competence.

Unlicensed staff

All staff that by virtue of their education and training is eligible to obtain licensure, registration, or certification is required to be credentialed through Vetpro even if they do not hold an active license, registration, or certification at the time they are appointed.

Unlicensed nurses, physicians, pharmacists, clinical psychologists, and others requiring licenses, registration, or certifications for clinical practice cannot be hired into those occupations unless they obtain an active license, registration, or certification for the occupation and qualify under VA qualification standards. If they do not obtain the license, registration, or certification they must be hired under some other occupational category for which they qualify. If this other occupational category allows a scope of practice to perform procedures AND there is no requirement for licensure or certification, then with a duly exercised scope of practice after the appropriate credentialing could be processed. *Note: See VHA Directive 2006-067 for a list of all effected occupations*.

VetPro: Staff that must be credentialed in VetPro

- All health care professionals who claim licensure, certification or registration as applicable to their position within VHA.

- All research staff that holds a degree that may make them eligible for licensure, registration, or certification. Such persons would include but is not limited to: nurses, physicians, Foreign Medical Graduates, Clinical Psychologists, and pharmacists that do not have a current active license. Note: See VHA Directive 2006-067 for a more complete list.

- All research staff including research administrative personnel, who by the nature of their position have the potential to assume patent care-related duties, or oversee the quality or safety of the patient care delivered, e.g. Research Assistants, Project Officers, etc..

Research Credentialing Verification

Name:	**Email address:**
Principal Investigator	**Phone No.**

Please answer the following questions after you have read "Requirement for credentialing of all research staff"

1. Do you hold a degree that may make you eligible for licensure, registration or certification?

☐ Yes ☐ No

2. If yes, list specific Degrees that apply (MBBS, MD, RN, MSW, RRT, PhD ---specify area of study for the PhD)

3. Please list all current or past licensure, registration, or certification (no matter State or specialty this was held in).

4. By the nature of your position at the VA, do you have the potential to assume patient care-related duties or oversee the quality or safety of the patient care delivered, e.g. Research Assistants, Study Coordinators, etc.

☐ Yes ☐ No

5. Are you currently credentialed through Vetpro? ☐ Yes ☐ No

Employee Signature	**Date**	**Principal Investigator Signature *(Required)***	**Date**

Research/HSR&D Service Initial Information Form

Service will contact the applicant and obtain the following information.
This information is necessary for Medical Staff/Credentialing Office and Human Resources.

VAAAHS
2215 Fuller Road 11C
Ann Arbor, MI 48105

PLEASE PRINT LEGIBILY

Full Name: _____
First Middle Last

Date of Birth:_____/____ /_____
Month Day Year

Social Security Number: _____ - _____ - _____

Home Address: _____

_____

Email Address: _____

Daytime Phone #: _____ Fax #: _____

Specialty: _____

Is the applicant a U.S. Citizen? Yes or No or Green Card (please circle one)

Is the applicant a Male or Female? (please circle one)

Applicant will be: ( ) Full Time ( ) Part Time ( ) Consultant ( ) Contract ( ) Fee Basis ( ) MOD ( ) WOC

Target Start Date of Applicant: _____

Person completing this form: _____ Phone #: _____

Service: _____ Date: _____

1. What is the required degree, education, license and certification for the provider's research position?
_____
2. Is a Physician/Dentist/PA/NP/CRNA/clinical PhD required to hold that position? _____
3. Is there patient care? _____
4. Will he/she be a provider noted on patient records/entering patient information? _____

***Note: If the answer is "yes" for questions 2 thru 4 the Medical Staff Office will credential the provider.**

Once the Initial Information Form is completed, Research Service will forward a copy to: Human Resources and Medical Staff Office (if applicable).

May 10, 2007

Scope of Practice or Functional Statement

A Scope of Practice or Functional Statement outlines all the duties of employees. These duties must: 1) be consistent with the occupational category under which they are hired, 2) allowed by the license, registration, or certification they hold, 3) consistent with their qualifications (education & training), and 4) be agreed upon by the person's immediate supervisor and the ACOS. *Note: When working on specific research protocols, the Principal Investigator for each protocol must also agree*.

Clinical Privileges

If the person's license allows for independent practice and the facility chooses to allow independent practice, privileges must be granted in accordance with VHA Handbook 1100.19 and the facility's Medical Staff Bylaws, Rules and Regulation prior to performing the interventions covered under the privileges they have been granted.

Points to consider

Individuals must not practice beyond the occupation they are hired/appointed into and their Scope of Practice or Functional Statement.

Principal Investigators are responsible for the overall conduct of their research protocols including ensuring that all research staff for the protocol are working within their Scope of Work or Functional Statement.

The appropriate background check as defined in VA Directive and Handbook 0710 must also be completed. *Note: For those employees working with Select Agents or Toxins, additional background investigations must be completed. See VHA Handbook 1200.06 for more information.*

Trainees from our academic affiliates must have a Resident/Trainee Credentials Verification Letter (RCVL) prior to any interactions with research subjects. VHA Handbook 1400.1 contains further information regarding residents and trainees.

Human Resource Management (HRM) responsibilities

HRM has the primary responsibility for verifications of a candidates qualifications including education, relevant training and experience, and current competence to hold the position. HRM is also responsible for checking US citizenship or visa status.

ACOS/R&D and/or AO/R&D responsibilities

Either the ACOS/R&D and/or the AO/R&D must ensure that all research staff:

- Have been credentialed prior to appointment. If not, they must be credentialed ASAP. *Note: Credentialing for those who are covered by Directive 2006-067*

and VHA Handbook 1100.19 must be credentialed through VetPro. Staff that hold a degree that may make them eligible for licensure, registration, or certification related to in health care must also be credentialed through VetPro.

- Have a Scope of Practice or Functional Statement that is consistent with their education, licensure, or certification, and

- Have been granted the appropriate privileges, if applicable under the facility's Bylaws,

In addition, the following must be done:

- Annually ascertain compliance with these requirements.

- Maintain records that will adequately show these responsibilities have been fulfilled.

VHA Policies regarding credentialing

- VHA Directive 2006-067 December 22, 2006 "Credentialing of Health Care Professionals"
- VHA Handbook 1100.19 March 6, 2001 "Credentialing and Privileging"

- VHA Handbook 1400.1 July 27, 2005 "Resident Supervisions"

- VA handbook and Directive 0710, September 10, 2004 "Personnel Suitability and Security"

- VA Handbook 5005 April 15, 2002 "Staffing"

Research Service (151)

RESEARCH EMPLOYEE SAFETY TRAINING CHECKLIST

Employee Name:	Supervisor:	**WOC Employee** ☐ **VA Employee** ☐	**Start Date:**

All research personnel must have annual safety training. Complete this form with your supervisor, sign, date and return this form to the research office (11R) within seven (7) days of employee's start date. This form is used to document mandatory annual safety training requirements.

☐	1. **Location and *use* of Life Safety Equipment**:	☐	5. **MSDS Sheets** (Material Safety Data Sheets) - location and use
☐	**a. Fire Safety** 1. Fire Emergency Plan - RACE 2. Pull Stations - location & fire codes 3. Fire Extinguishers - location & usage	☐	6. **Review the Hazardous Materials Management Plan** **MCM # S-2** http://www1.va.gov/aavaresearch/docs/S2_2005.doc
☐	**b. Minimum Accessibility Requirements** 1. Maintain a 48" corridor width 2. Storage at least 18" from sprinkler heads 3. Maintain a 36" semi-circle of access to electrical panels	☐	7. **Safety Management Program** **MCM #S-3** http://www1.va.gov/aavaresearch/docs/S3.doc a. Inspection tags on Equipment b. Elec. Shock Hazards
☐	**c. Showers, Eye Washes** (location, how to use & check functioning & monthly update of inspection tags for eye washes)	☐	8. **Exposure Control Plan for Bloodborne Pathogens MCM #S-4** http://www1.va.gov/aavaresearch/docs/S4.doc a. To work with human blood/body fluids b. Post Exposure Evaluation and Follow-up
☐	**d. Spill Kits** for Acid, Caustic, Flammable, Blood & Body fluids (how to use, fully stocked kits) 1. Replacement supplies	☐	9. .**Emergency Preparedness Plan** **MCM #S-5** http://www1.va.gov/aavaresearch/docs/S5.doc a. Horizontal Evacuation
☐	**e. Safety equipment specific to your lab** including personal protection equipment 1. Lab coats 2. Eye, Face, Hand, Foot, Head	☐	10. **Operation of equipment** (such as sterilizers and centrifuges) a. Location of operation Manual b. Documented User Training
☐	**2. Medical Center Safety Policies Manual** (review location and check documentation that each person who works in the lab has reviewed manual) (Also located on "T" Drive; Public/Policies/Policies-Current/Safety	☐	11. **VHA Handbook for Safety of Personnel in Research 1200.8** http://www1.va.gov/aavaresearch/docs/1200_8.doc
☐	3. **VA Research Safety Manual On-Line** http://www1.va.gov/aavaresearch/page.cfm?pg=4	☐	12. **Specific job related hazards** a. Gas cylinder storage and handling b. Moving chemicals to storage c. Glass d. Chemical inventory e. Biohazard
☐	4. **Radiation Safety and ALARA** **MCM #S-1** http://www1.va.gov/aavaresearch/docs/S1_ALARA.doc (Annual Training will be scheduled by the VA Radiation Safety Officer)	☐	**NO FOOD OR DRINKS IN LABS** No eating or drinking in labs No coffee cups or pop cans on benches No food in laboratory refrigerators **VIOLATORS WILL BE FINED $500**

Employee Signature:	*Date:*	*Investigator Signature:*	*Date:*

10-06-2006 (df)

VA HUMAN SUBJECTS RESEARCH TRAINING POLICY

1. All new study team members must complete The Scope of Practice Survey Form
Combined Scope of Practice Form (click-link)

2. Human Subjects Research Education Policy

a. All new human research study personnel must complete the VA IRB Human Subjects Research Education requirements prior to engaging in research projects at the VAAAHS.

b. All continuing Investigators and Study Team Members must retake a VA-approved training course at least once every **3 years**. If you fail to comply with the VA IRB Human Subjects Education Policy you must cease all work with human subjects in the research setting.

Primary Course Choice
VA CITI COURSE AT CITIPROGRAM.ORG

1. Web-Link **= https://www.citiprogram.org/default.asp**
2. Select Your Institution: **VA Ann Arbor, MI-506**

VA ANIMAL STUDIES RESEARCH EDUCATION POLICY

1. Web-Link **= https://www.citiprogram.org**
2. Select Your Institution: **VA Ann Arbor, MI - 506**
3. Selecting the Correct Course Groups:
   Question #2 => Yes if you are a IACUC Member
   Question #3 => Yes (Working with the VA IACUC)
   Question #4 => Check EACH species utilized in your animal research activities
   Question #5 => Yes if you perform or supervise survival surgery in rodent species
   Question #6 => Yes if you are a new research laboratory worker (VA Biosecurity Training)
4. WOC Personnel Working with Animals

NEW VA RESEARCH LABORATORY WORKERS

If you work in a VA Research Laboratory, you must complete the following:
"Introduction to VA Biosecurity Concepts" course and exam at this web site:

1. Web-Link **= https://www.citiprogram.org**
2. Select Your Institution: **VA Ann Arbor, MI-506**
3. Selecting the Correct Course Groups:
   Question #6 => Yes if you are a new research laboratory worker (VA Biosecurity Training)

If you have any questions, please feel free to contact us.
a. R&D Coordinator: Leonard Cooke at 845-5602
b. Human Studies Coordinators: Cathy Kaczmarek & Terry Robinson at 845-3440
c. Animal Studies + Research Safety Coordinator: Carolyn Slusher at 222-7981
d. WOC Coordinator: Christina Wayne at 845-5600

FAX = 734-845-3241 VA Mail = 151 UM Mail = Zip 2399 US Mail = 2215 Fuller Rd.

VA HEALTH CARE Defining EXCELLENCE in the 21st Century
Ann Arbor • Flint • Jackson • Toledo

Scope of Practice for Research Personnel

NAME OF RESEARCH PERSONNEL	EMAIL ADDRESS
PRIMARY SUPERVISOR *(conducts the employee's annual evaluation and initiates this form)*	**ROLE IN RESEARCH** *(Investigator, Research Staff, Statistician, Consultant, Etc…)*

Please indicate type of Employee:

☐ Study Team Member – VA Employee

☐ Study Team Member – IPA or WOC Employee

1. RESEARCH TEAM MEMBERS: The Scope of Practice is specific to the duties and responsibilities of Research Personnel (Employee or WOC) as an agent of the listed Supervisor. As such he/she is specifically authorized to conduct research with the responsibilities outlined below. Only one Research Scope of Practice is required for each Research Staff Member. When Research personnel are involved in multiple studies, this scope of practice should encompass all of the duties that the individual is authorized to perform. All Principal Investigators for whom the staff member will be working (who are not the supervisor), should also review the Scope of Practice Statement to ensure that the duties authorized match those that will be performed as part of the research. Local training may be required to perform some of the duties authorized to conduct a study.

2. PRINCIPAL INVESTIGATORS: A Scope of Practice must be completed for Principal Investigators to delineate their Research duties outside of the Credentialing and Clinical Privileges granted by the Medical Center. This includes all duties performed in addition to the PI oversight responsibility.

3. PROCEDURES: The supervisor(s) must complete this Scope of Practice granting duties/procedures the personnel may be authorized to perform on a regular and ongoing basis. Please check and complete the applicable Sections I and II. Section III is required for all Scopes of Practice.

☐ **SECTION I** is completed for Human Subject research activities.

☐ **SECTION II** is completed for Bench and/or Animal research activities.

SECTION III requires signatures of the Research Personnel and PI/VA Supervisor and date. If the individual works for more than one PI, that PI should also review this document.

SECTION IV Documentation of Annual Review will be required annually at the time of Continuation Review.

SECTION I HUMAN SUBJECT RESEARCH

Routine Duties	YES	NO
1. Screens patients to determine study eligibility criteria by reviewing patient medical information or interviewing subjects.	☐	☐
2. Develops recruitment methods to be utilized in the study.	☐	☐
3. Performs venipuncture to obtain specific specimens required by study protocol (requires demonstrated and documented competencies).	☐	☐
4. Initiates submission of regulatory documents to VAAAHS VA IRB, VA R&D committee, sponsor and other regulatory agencies.	☐	☐
5. Involved in study medication use, administration, storage, side effects and notification of adverse drug reactions to study site.	☐	☐
6. Provides education to patient, relatives and Medical Center staff regarding study activities.	☐	☐
7. Maintains complete and accurate data collection in case report forms and source documents.	☐	☐
8. Initiates and/or expedites requests for consultation, special tests or studies following the Investigator's approval.	☐	☐
9. Demonstrates proficiency with VISTA/CPRS computer system by scheduling subjects research visits, documenting progress notes, initiating orders, consults, etc.	☐	☐
10. Accesses patient medical information while maintaining patient confidentiality.	☐	☐
11. Is authorized to obtain informed consent from research subject and is knowledgeable to perform the informed consent "process".	☐	☐
12. Collects and handles various types of human specimens (serum, sputum, urine, tissue, etc.)	☐	☐
13. Process and ship specimens, chemicals, reagents, etc. (*Requires Shipping of Hazardous Materials training, U.S. Department of Transportation, available through the Safety Office – Joe Jurasek)*	☐	☐
14. Enters data into databases.	☐	☐
15. Initiates intravenous (IV) therapy and administers IV solutions and medications.	☐	☐
Principal Investigator Duties	**YES**	**NO**
Serves as the Principal Investigator/Co-Principal Investigator on human subjects Research; thereby, providing oversight of the study and all study staff.	☐	☐

MISCELLANEOUS DUTIES (if applicable:

The above individual is authorized to perform in the following miscellaneous duties not otherwise specified in this Scope of Practice.

1. _____

2. _____

3. _____

If Section II Bench and/or Animal research is not applicable, skip to the Signature page (Section III).

SECTION II BENCH and/or ANIMAL SUBJECT RESEARCH

Bench Routine Duties	YES	NO
1. Use and store chemicals (e.g., toxic, carcinogenic, flammable, teratogenic)	☐	☐
2. Operate routine laboratory equipment including centrifuges, safety cabinets, exhaust hoods, etc.	☐	☐
3. Use containment equipment (e.g., protective clothing, safety cabinets, etc.)	☐	☐
4. Use biomaterials, microbial or viral agents, pathogens and/or toxins.	☐	☐
5. Use molecular biology techniques (e.g., cloning, etc.) and vectors.	☐	☐
6. Use radioactive materials and/or radiation generating equipment. (*Radiation Safety approval required to order/use radioactive materials*.)	☐	☐
7. Collects, records, or analyzes animal/laboratory research data.	☐	☐
8. Process and ship specimens, chemicals, reagents, etc. (*Requires Shipping of Hazardous Materials training, U.S. Department of Transportation, available through the Safety Office – Joe Jurasek)*	☐	☐
Principal Investigator Duties	**YES**	**NO**
Serves as the Principal Investigator/Co-Principal Investigator on bench science research; thereby, providing oversight of the study and all study staff.	☐	☐

Animal Subject Routine Duties	YES	NO
1. Is knowledgeable about the ethical and safe handling of animals and performs procedures involving animals (e.g. tailing, surgery, and/or behavioral interventions). *Requires completion of the CITI Species Specific training.*	☐	☐
a. Performs special husbandry and/or practices as required.	☐	☐
b. Performs surgical procedures on small animals.	☐	☐
c. Performs surgical procedures on large animals.	☐	☐
d. Administers euthanasia for animals in approved ACORPs.	☐	☐
e. Obtains blood specimens from animals.	☐	☐
f. Administers parenteral injections (IP-intraperitoneal, SQ-subcutaneous, IM-intramuscular, IV-intravenous) I	☐	☐
g. Administers substances PO (orally).	☐	☐
h. Works with breeding colony protocols	☐	☐
2. Uses safe procedures involving animals and uses protective equipment appropriately (e.g. gloves, mask, eye protection, protective clothing).	☐	☐
3. Orders laboratory animals.	☐	☐
Principal Investigator Duties	**YES**	**NO**
Serves as the Principal Investigator/Co-Principal Investigator on animal subject research; thereby, providing oversight of the study and all study staff.	☐	☐

MISCELLANEOUS DUTIES (if applicable:

The above individual is authorized to perform in the following miscellaneous duties not otherwise specified in this Scope of Practice.

1. _____

2. _____

3. _____

Complete the Signature Page in Section III.
SECTION III SIGNATURE PAGE (*Submit along with the Section(s) applicable to the individual's Scope of Practice*)

Principal Investigator/Supervisor's Statement:

The Scope of Practice was reviewed and discussed with the personnel on the date shown below. After reviewing his/her education, competency, qualifications, peer reviews, and individual skills, I certify that he/she possesses the skills to safely perform the aforementioned duties/procedures.

Both the personnel and I are familiar with all duties/procedures granted in this Scope of Practice. We agree to abide by the parameters of this Scope of Practice, all applicable facility policies and regulations.

This Scope of Practice will be reviewed annually and amended as necessary to reflect changes in the individual's duties/ responsibilities. A new Scope of Practice will be completed if the employee is assigned a new supervisor.

Research Personnel	Date
Supervisor	Date

The original signed Scope of Practice will be maintained in the Research Business Office. The Supervisor and Research Personnel should maintain a copy of the Scope of Practice in preparation of any change in duties and required annual review. The PI must keep a copy of all SOPs in each study's Regulatory Binder.

OFFICE USE ONLY:

ACOS/Research & Development Service	Date

WOC Occupational Health & Safety Survey for Personnel with Laboratory Animal Contact

Name:	SSN:
Supervisor:	email:
Lab location:	Lab phone:

Animal Contact

1. What species of animals will you be exposed to? (This includes direct contact with animals, animal tissues and/or wastes, and animal enclosures.)

2. What kind of contact will you have? (Check all that apply.)
   - ☐ Direct contact with animals
   - ☐ Direct contact with non-fixed or non-sterilized animal tissues, fluids or wastes
   - ☐ Direct contact with non-sanitized animal caging or enclosures
   - ☐ Service support to animal equipment, devices, and/or facilities

3. Have you had any of the following vaccinations(if so, indicate date of most recent)
   - ☐ Hepatitis A --
   - ☐ Hepatitis B --
   - ☐ Tuberculosis Skin Testing --

4. Do you or will you handle animals that have been given infectious biohazards?
   ☐ Yes ☐ No
   If YES, please provide the following information:
   Infectious agent:
   CDC Class of agent:
   Date of infectious biosafety training:

5. Do you or will you handle animals that have been exposed to or given radiation hazards?
   ☐ Yes ☐ No
   If YES, please describe the type of radiation hazard (e.g. UV, laser, ionizing):
   Date of radiation safety training:

6. Do you or will you handle animals that have been given chemical hazards?
   ☐ Yes ☐ No
   If YES, please describe the chemical hazard:

7. **I participate in the University of Michigan Occupational Health and Safety Program for Personnel Working with Animals.** ☐ Yes ☐ No
   If NO, I have signed the waiver below. ☐ Yes ☐ No

8. I have read and understand the "Occupational Health and Safety Program (OHSP) for Personnel with Laboratory Animal Contact" brochure included in the WOC Registration Packet (yellowbook) ☐ Yes

I verify that all information I have provided is accurate.

Employee Signature: _____ Date:_____

Occupational Health Questionnaire Waiver

I decline participation in the Occupational Health and Safety Program for animal handlers at this time.

- I understand the occupational health risks of working with animals

_____ _____

Signature of Participant Date

Department of Veterans Affairs (VA) National Rules of Behavior

1. Background

a. Section 5723(b)(12) of title 38, United States Code, requires the Assistant Secretary for Information and Technology to establish "VA National Rules of Behavior for appropriate use and protection of the information which is used to support Department's missions and functions." The Office of Management and Budget (OMB) Circular A-130, Appendix III, paragraph 3(a(2)(a) requires that all Federal agencies promulgate rules of behavior that "clearly delineate responsibilities and expected behavior of all individuals with access" to the agencies' information and information systems, as well as state clearly the "consequences of behavior not consistent" with the rules of behavior. **The National Rules of Behavior that begin on page G-3, are required to be used throughout the VA**.

b. Congress and OMB require the promulgation of national rules of behavior for two reasons. First, Congress and OMB recognize that knowledgeable users are the foundation of a successful security program. Users must understand that taking personal responsibility for the security of their computer and the VA data that it contains or that may be accessed through it, as well as the security and protection of VA information in any form (e.g. digital, paper), are essential aspects of their job. Second, individuals must be held accountable for their use of VA information and information systems.

c. VA must achieve the Gold Standard in data security which requires that VA information and information system users protect VA information and information systems, especially the personal data of veterans, their family members, and employees. Users must maintain a heightened and constant awareness of their responsibilities regarding the protection of VA information. The Golden Rule with respect to this aspect of an employee's job is to treat the personal information of others the same as they would their own.

d. Since written guidance cannot cover every contingency, personnel are asked to go beyond the stated rules, using "due diligence" and highest ethical standards to guide their actions. Personnel must understand that these rules are based on Federal laws, regulations, and VA Directives.

2. Coverage

a. The attached VA National Rules of Behavior must be signed annually by all VA employees who are provided access to VA information or VA information systems. The term VA employees includes all individuals who are employees under title 5 or title 38, United States Code, as well as individuals whom the Department considers employees such as volunteers, without compensation employees, and students and other trainees. Directions for signing the rules of behavior by other individuals who have access to VA information or information systems, such as contractor employees, will be addressed in subsequent policy. VA employees must initial and date each page of the copy of the VA National Rules of Behavior; they must also provide the information requested on the last page, sign and date it.

b. The VA National Rules of Behavior address notice and consent issues identified by the Department of Justice and other sources. It also serves to clarify the roles of management

and system administrators, and serves to provide notice of what is considered acceptable use of all VA information and information systems, VA sensitive information, and behavior of VA users.

c. The VA National Rules of Behavior use the phrase "VA sensitive information". This phrase is defined in VA Directive 6500, paragraph 5q. This definition covers all information as defined in 38 USC 5727(19), and in 38 USC 5727(23). The phrase "VA sensitive information" as used in the attached VA National Rules of Behavior means:

> All Department data, on any storage media or in any form or format, which requires protection due to the risk of harm that could result from inadvertent or deliberate disclosure, alteration, or destruction of the information. The term includes information whose improper use or disclosure could adversely affect the ability of an agency to accomplish its mission, proprietary information, records about individuals requiring protection under various confidentiality provisions such as the Privacy Act and the HIPAA Privacy Rule, and information that can be withheld under the Freedom of Information Act. Examples of VA sensitive information include the following: individually-identifiable medical, benefits, and personnel information, financial, budgetary, research, quality assurance, confidential commercial, critical infrastructure, investigatory, and law enforcement information, information that is confidential and privileged in litigation such as information protected by the deliberative process privilege, attorney work-product privilege, and the attorney-client privilege, and other information which, if released, could result in violation of law or harm or unfairness to any individual or group, or could adversely affect the national interest or the conduct of federal programs.

d. The phrase "VA sensitive information" includes information entrusted to the Department.

3. Rules of Behavior

a. Immediately following this section is the VA approved National Rules of Behavior that all employees (as discussed in paragraph 2a of Appendix G) who are provided access to VA information and VA information systems are required to sign in order to obtain access to VA information and information systems.

Department of Veterans Affairs (VA) National Rules of Behavior

I understand, accept, and agree to the following terms and conditions that apply to my access to, and use of, information, including VA sensitive information, or information systems of the U.S. Department of Veterans Affairs.

1. GENERAL RULES OF BEHAVIOR

a. I understand that when I use any Government information system, I have NO expectation of Privacy in VA records that I create or in my activities while accessing or using such information system.

b. I understand that authorized VA personnel may review my conduct or actions concerning VA information and information systems, and take appropriate action. Authorized VA personnel include my supervisory chain of command as well as VA system administrators and Information Security Officers (ISOs). Appropriate action may include monitoring, recording, copying, inspecting, restricting access, blocking, tracking, and disclosing information to authorized Office of Inspector General (OIG), VA, and law enforcement personnel.

c. I understand that the following actions are prohibited: unauthorized access, unauthorized uploading, unauthorized downloading, unauthorized changing, unauthorized circumventing, or unauthorized deleting information on VA systems, modifying VA systems, unauthorized denying or granting access to VA systems, using VA resources for unauthorized use on VA systems, or otherwise misusing VA systems or resources. I also understand that attempting to engage in any of these unauthorized actions is also prohibited.

d. I understand that such unauthorized attempts or acts may result in disciplinary or other adverse action, as well as criminal, civil, and/or administrative penalties. Depending on the severity of the violation, disciplinary or adverse action consequences may include: suspension of access privileges, reprimand, suspension from work, demotion, or removal. Theft, conversion, or unauthorized disposal or destruction of Federal property or information may also result in criminal sanctions.

e. I understand that I have a responsibility to report suspected or identified information security incidents (security and privacy) to my Operating Unit's Information Security Officer (ISO), Privacy Officer (PO), and my supervisor as appropriate.

f. I understand that I have a duty to report information about actual or possible criminal violations involving VA programs, operations, facilities, contracts or information systems to my supervisor, any management official or directly to the OIG, including reporting to the OIG Hotline. I also understand that I have a duty to immediately report to the OIG any possible criminal matters involving felonies, including crimes involving information systems.

 Date:_____ Initials:_____

g. I understand that the VA National Rules of Behavior do not and should not be relied upon to create any other right or benefit, substantive or procedural, enforceable by law, by a party to litigation with the United States Government.

h. I understand that the VA National Rules of Behavior do not supersede any local policies that provide higher levels of protection to VA's information or information systems. The VA National Rules of Behavior provide the minimal rules with which individual users must comply.

i. **I understand that if I refuse to sign this VA National Rules of Behavior as required by VA policy, I will be denied access to VA information and information systems. Any refusal to sign the VA National Rules of Behavior may have an adverse impact on my employment with the Department.**

2. SPECIFIC RULES OF BEHAVIOR.

a. I will follow established procedures for requesting access to any VA computer system and for notification to the VA supervisor and the ISO when the access is no longer needed.

b. I will follow established VA information security and privacy policies and procedures.

c. I will use only devices, systems, software, and data which I am authorized to use, including complying with any software licensing or copyright restrictions. This includes downloads of software offered as free trials, shareware or public domain.

d. I will only use my access for authorized and official duties, and to only access data that is needed in the fulfillment of my duties except as provided for in VA Directive 6001, Limited Personal Use of Government Office Equipment Including Information Technology. I also agree that I will not engage in any activities prohibited as stated in section 2c of VA Directive 6001.

e. I will secure VA sensitive information **in all areas** (at work and remotely) and in any form (e.g. digital, paper etc.), to include mobile media and devices that contain sensitive information, and I will follow the mandate that all VA sensitive information must be in a protected environment at all times or it must be encrypted (using FIPS 140-2 approved encryption). If clarification is needed whether or not an environment is adequately protected, I will follow the guidance of the local Chief Information Officer (CIO).

f. I will properly dispose of VA sensitive information, either in hardcopy, softcopy or electronic format, in accordance with VA policy and procedures.

g. I will not attempt to override, circumvent or disable operational, technical, or management security controls unless expressly directed to do so in writing by authorized VA staff.

h. I will not attempt to alter the security configuration of government equipment unless authorized. This includes operational, technical, or management security controls.

i. I will protect my verify codes and passwords from unauthorized use and disclosure and ensure I utilize only passwords that meet the VA minimum requirements for the systems that I am authorized to use and are contained in Appendix F of VA Handbook 6500.

j. I will not store any passwords/verify codes in any type of script file or cache on VA systems.

k. I will ensure that I log off or lock any computer or console before walking away and will not allow another user to access that computer or console while I am logged on to it.

l. I will not misrepresent, obscure, suppress, or replace a user's identity on the Internet or any VA electronic communication system.

m. I will not auto-forward e-mail messages to addresses outside the VA network.

n. I will comply with any directions from my supervisors, VA system administrators and information security officers concerning my access to, and use of, VA information and information systems or matters covered by these Rules.

o. I will ensure that any devices that I use to transmit, access, and store VA sensitive information outside of a VA protected environment will use FIPS 140-2 approved encryption (the translation of data into a form that is unintelligible without a deciphering mechanism). This includes laptops, thumb drives, and other removable storage devices and storage media (CDs, DVDs, etc.).

p. I will obtain the approval of appropriate management officials before releasing VA information for public dissemination.,

q. I will not host, set up, administer, or operate any type of Internet server on any VA network or attempt to connect any personal equipment to a VA network unless explicitly authorized **in writing** by my local CIO and I will ensure that all such activity is in compliance with Federal and VA policies.

r. I will not attempt to probe computer systems to exploit system controls or access VA sensitive data for any reason other than in the performance of official duties. Authorized penetration testing must be approved in writing by the VA CIO.

s. I will protect Government property from theft, loss, destruction, or misuse. I will follow VA policies and procedures for handling Federal Government IT equipment and will sign for items provided to me for my exclusive use and return them when no longer required for VA activities.

t. I will only use virus protection software, anti-spyware, and firewall/intrusion detection software authorized by the VA on VA equipment or on computer systems that are connected to any VA network.

u. If authorized, by waiver, to use my own personal equipment, I must use VA approved virus protection software, anti-spyware, and firewall/intrusion detection software and ensure

the software is configured to meet VA configuration requirements. My local CIO will confirm that the system meets VA configuration requirements prior to connection to VA's network.

v. I will never swap or surrender VA hard drives or other storage devices to anyone other than an authorized OI&T employee at the time of system problems.

w. I will not disable or degrade software programs used by the VA that install security software updates to VA computer equipment, to computer equipment used to connect to VA information systems, or to create, store or use VA information.

x. I agree to allow examination by authorized OI&T personnel of any personal IT device [Other Equipment (OE)] that I have been granted permission to use, whether remotely or in any setting to access VA information or information systems or to create, store or use VA information.

y. I agree to have all equipment scanned by the appropriate facility IT Operations Service prior to connecting to the VA network if the equipment has not been connected to the VA network for a period of more than three weeks.

z. I will complete mandatory periodic security and privacy awareness training within designated timeframes, and complete any additional required training for the particular systems to which I require access.

aa. I understand that if I must sign a non-VA entity's Rules of Behavior to obtain access to information or information systems controlled by that non-VA entity, I still must comply with my responsibilities under the VA National Rules of Behavior when accessing or using VA information or information systems. However, those Rules of Behavior apply to my access to or use of the non-VA entity's information and information systems as a VA user.

bb. I understand that remote access is allowed from other Federal government computers and systems to VA information systems, subject to the terms of VA and the host Federal agency's policies.

cc. I agree that I will directly connect to the VA network whenever possible. If a direct connection to the VA network is not possible, then I will use VA-approved remote access software and services. I must use VA-provided IT equipment for remote access when possible. I may be permitted to use non–VA IT equipment [Other Equipment (OE)] only if a VA-CIO-approved waiver has been issued and the equipment is configured to follow all VA security policies and requirements. I agree that VA OI&T officials may examine such devices, including an OE device operating under an approved waiver, at any time for proper configuration and unauthorized storage of VA sensitive information.

dd. I agree that I will not have both a VA network connection and any kind of non-VA network connection (including a modem or phone line or wireless network card, etc.) physically connected to any computer at the same time unless the dual connection is explicitly authorized in writing by my local CIO.

ee. I agree that I will not allow VA sensitive information to reside on non-VA systems or devices unless specifically designated and approved in advance by the appropriate VA official (supervisor), and a waiver has been issued by the VA's CIO. I agree that I will not access, transmit or store remotely any VA sensitive information that is not encrypted using VA approved encryption.

ff. I will obtain my VA supervisor's authorization, in writing, prior to transporting, transmitting, accessing, and using VA sensitive information outside of VA's protected environment..

gg. I will ensure that VA sensitive information, in any format, and devices, systems and/or software that contain such information or that I use to access VA sensitive information or information systems are adequately secured in remote locations, e.g., at home and during travel, and agree to periodic VA inspections of the devices, systems or software from which I conduct access from remote locations. I agree that if I work from a remote location pursuant to an approved telework agreement with VA sensitive information that authorized OI&T personnel may periodically inspect the remote location for compliance with required security requirements.

hh. I will protect sensitive information from unauthorized disclosure, use, modification, or destruction, including using encryption products approved and provided by the VA to protect sensitive data.

ii. I will not store or transport any VA sensitive information on any portable storage media or device unless it is encrypted using VA approved encryption.

jj. I will use VA-provided encryption to encrypt any e-mail, including attachments to the e-mail, that contains VA sensitive information before sending the e-mail. I will not send any e-mail that contains VA sensitive information in an unencrypted form. VA sensitive information includes personally identifiable information and protected health information.

kk. I may be required to acknowledge or sign additional specific or unique rules of behavior in order to access or use specific VA systems. I understand that those specific rules of behavior may include, but are not limited to, restrictions or prohibitions on limited personal use, special requirements for access or use of the data in that system, special requirements for the devices used to access that specific system, or special restrictions on interconnections between that system and other IT resources or systems.

3. Acknowledgement and Acceptance

a. I acknowledge that I have received a copy of these Rules of Behavior.

b. I understand, accept and agree to comply with all terms and conditions of these Rules of Behavior.

_____	_____
[Print or type your full name]	Signature
_____	
Date	
_____	_____
Office Phone	Position Title

Occupational Health and Safety Program (OHSP) for Personnel with Laboratory Animal Contact

Each VA facility with an animal research program must establish an OHSP to protect the personnel who are involved in animal research, or who are otherwise at risk of exposure to animals or their (unfixed) tissues or fluids. The purpose of this brochure is to explain the components of the OHSP, and provide information on how you can minimize the chance of any adverse health effects from working with laboratory animals.

Who should participate? All personnel who work with animals or unfixed tissues in VA research must be given the opportunity to enroll in the OHSP at the VA facility at no charge. Furthermore, individuals who may have intermittent animal exposure must also be given the opportunity to enroll (e.g. IACUC members, housekeeping staff, physical plant, VA police officers) You may choose to decline to receive OHSP services that aren't required to protect the health of personnel and animals. To enroll, contact your VA research administrators or Occupational Health.

What is included? The services you receive will depend on the type and frequency of exposure, and your medical history. A medical surveillance questionnaire is often used to assess your individual risk factors. A health professional will review your responses and determine the frequency and type of interaction (tuberculin testing, immunizations, etc.) with the OHSP.

ANIMAL EXPOSURE RISKS

The hazards associated with handling animals can be divided into three categories:

1) Physical Hazards. Examples of such hazards include animal bites and scratches, sharps injuries, injuries associated with moving cages or equipment, and adverse consequences from excessive noise or accidental exposure to workplace. The key to preventing these injuries is proper training and meticulous attention to proper work practices.

- Use appropriate techniques for animal handling and restraint.
- Do not recap needles and dispose of sharps in approved containers.
- Employ good ergonomic practices to avoid muscle sprains and repetitive motion injuries.
- Wear recommended personal protective equipment (PPE) such as a lab coat, gloves, eye and hearing protection.

2) Allergies. Allergic reactions to animals are among the most common conditions that affect the health of workers exposed to laboratory animals. Sneezing, itchy eyes, and skin rashes are typical clinical signs, but in serious cases, asthma or anaphylaxis may occur. Allergens include urine, dander, and saliva, especially from rodents. You can limit exposure to allergens by using appropriate PPE and using safe work practices.

Protect Yourself from Allergies!

- Work in a clean, well-ventilated environment.
- Wear appropriate PPE such as a lab coat and disposable gloves, and **never rub your face or eyes** until you have removed your gloves and washed your hands thoroughly.
- It may be helpful to wear a surgical-type mask to reduce airborne exposure in animal rooms. If you need a respirator, you must be medically cleared, fit tested and trained annually.

3) Zoonotic diseases. Zoonotic diseases are those that can be transmitted from animals (or animal tissues) to humans. Although a substantial number of animal pathogens may cause disease in humans, zoonotic diseases are not common in modern animal facilities, largely because of prevention, detection, and eradication programs.

Unfortunately some infections of animals may produce serious disease in humans *even when the animals themselves show few (if any) signs of illness*. Therefore, you must be aware of possible consequences when working with each species of animal and take precautions to minimize the risk of infection. **If you experience flu-like symptoms or other signs of illness, be sure to tell your doctor that you work with animals, just in case your illness is related to your work with animals.**

Prevention. Common sense steps that can be taken to lessen zoonotic disease risk include:

- Do not eat, drink, or apply cosmetics or contact lenses around animals.
- Wear gloves when handling animals or their tissues.
- Use proper manual and/or anesthetic restraint when working with fractious animals and/or administering hazardous agents.
- Work in pairs whenever possible.

- **Do not recap used needles!** Whenever possible, use safety devices, activate the safety feature as soon as possible and dispose them promptly in a biohazard "sharps" container.
- When performing procedures such as bedding changes, blood or urine collections, or necropsies, work in biological safety cabinets or wear specialized PPE as directed.
- **Consult your supervisor, the Safety Officer, or Occupational Health Health if you need additional training at any time.**

WHAT YOU SHOULD KNOW

About Bites, Scratches, and other Injuries…

Contact your Supervisor and Occupational Health immediately if you are bitten or scratched, if you injure yourself while performing your job, or if you experience unusual disease symptoms.

If you are Pregnant…

Working with hazardous agents and toxic chemicals is discouraged during pregnancy. Consult Employee Health and your personal physician for advice about working safely during pregnancy. Toxoplasma is an infectious agent sometimes shed in cat feces, and it can infect the fetus of pregnant women that do not have acquired immunity. Pregnant women should generally avoid any contact with cat feces or litter boxes.

If you work with Nonhuman Primates…

Diseases of nonhuman primates (NHPs) are often transmissible to humans. Although, several NHP viruses may cause disease in humans, *Herpesvirus simiae* (B-virus) is of greatest concern. This virus occurs naturally in macaques such as rhesus and cynomolgus monkeys. Infected monkeys usually show no clinical signs, but the virus may cause fatal brain infections in humans. Transmission to humans occurs via exposure to contaminated saliva, secretions, or tissues. This typically occurs as a result of a bite or scratch; transmission may also occur via splashes that come in contact with mucous membranes or via injuries caused by contaminated equipment. Proper work practices are essential to preventing exposure.

- Wear PPE, (i.e. protective outer garments, gloves, face mask, and eye protection).
- Anesthetize monkeys whenever possible before handling.
- In the event of possible exposure, obtain medical attention immediately. Instructions for treating wounds and obtaining medical attention must be posted in each nonhuman primate area.

Tuberculosis may be transmitted both from humans to animals and from animals to humans. NHPs and individuals in contact with them must be screened for tuberculosis annually. *Shigella*, *Campylobacter*, *Salmonella*, and *Entamoeba histolytica* cause diarrhea in NHP species and may cause similar problems in humans exposed to NHP feces. Infection is best prevented by protection from aerosols, the use of gloves, and careful hand washing.

Simian immunodeficiency virus (SIV) is closely related to HIV, the human AIDS virus, and can, on rare occasions, affect macaques. Some evidence suggests it may infect humans as well, so measures should be taken to prevent contact with monkey blood or blood products.

If you work with Dogs or Cats…

The main risks associated with working with dogs and cats are bites and scratches. Sometimes scratches or bites can result in infections. Cat bites can result in particularly severe infections. Cat scratch fever (Bartonellosis) is caused by a rickettsial organism and is characterized by flu-like symptoms and swollen lymph nodes.

Rabies

The likelihood of contracting rabies as a result of a bite is now very low because research dogs and cats are typically vaccinated for rabies. Nevertheless, it is recommended that persons in contact with dogs or cats be vaccinated against rabies.

If you work with Farm Animals…

Q fever, a potentially serious disease caused by *Coxiella burnetii*, is carried by ruminants and shed abundantly from the placental membranes of sheep. Human exposure can result in pneumonia and other symptoms. Sheep used in research should be assumed to be infected, and careful measures taken to prevent transmission to humans. All individuals working with pregnant laboratory sheep should wear gloves, respiratory protection, and protective outerwear.

If you work with Rodents or Rabbits…

Allergies are common among personnel who work with rodents (e.g., mice, rats, guinea pigs, hamsters) and rabbits. If you have pre-existing allergies or if you experience a runny nose, itchy eyes, or skin rashes when working around these species you should report these symptoms immediately to Occupational Health. Measures can be taken to limit your exposure to allergens, thereby reducing the severity of symptoms and decreasing the likelihood that symptoms will worsen.

Rodents and rabbits obtained from commercial sources have a low risk of transmitting zoonotic diseases. However, animals caught in the wild can harbor a variety of bacterial, viral, fungal, and parasitic infections that can constitute a significant hazard to personnel.

If you work with Hazardous Agents…

The proper use of hazardous biological, chemical, and physical agents in animals depends on careful planning, proper training, and careful attention to prescribed work practices. Signs should be posted indicating the nature of the hazard, necessary precautions, and emergency contact information.

The PPE needed depends on the agent in use, but in all cases gloves should be worn and hands should be washed after handling potentially contaminated materials. A biological safety cabinet should be used when handling infectious materials, especially if there is a potential for generation of aerosols, and a fume hood should be used when handling toxic chemicals or radioactive materials. The measures must be appropriate for the specific hazard, as determined by the Safety/Biosafety Officer in consultation with the investigator, the Subcommittee on Research Safety, and the veterinarian.

FOR FURTHER INFORMATION

The services offered in your program may differ somewhat from those described in this pamphlet. For further information, contact your research administrators or Occupational Health. More guidance in this area can be found in VHA Handbook 1200.07, "Use of Animals in Research."

Department of Veterans Affairs

Assignment of Functional Categories

Employee's Name:	Job Title:
Department/Service Assigned:	

If employee falls into more than one functional category listed below, access should be granted based on the less restrictive category to meet the need of an intended purpose.

This table shows access or non access to PHI in regards to functional category, it does not show if a user needs access to their own System of Records (e.g. 24VA10P2) in order to complete their job functions. For a list of classes of people, please reference VHA Handbook 1605.02, Appendix B.

Immediate Supervisor: Check off functional category, review with employee, obtain signatures, and maintain copy in the *Supervisor's Personnel Files* (RCS 10-1, 05-3) for the individual employee. Review of Functional Category must be done on an annual basis, even if there is not a change.

	Functional Categories (Class of Persons)	**Type of Protected Health Information Accessible**	**Allowable Systems of Records for Limited Access**	**Conditions for Access to Information**
☐	Direct Care Providers	Entire Health Record		Treatment of Individuals
☐	Department of Veterans Affairs (VA) Researchers	Entire Health Record including research records		Activities as approved by an Institutional Review Board or Privacy Board
☐	Indirect Care Providers	Entire Health Record		In support of treatment of individuals
☐	Chief Business Office (CBO) Administrative	Entire Health Record		In support of CBO functions such as payment, reimbursement, income verification and eligibility benefits
☐	Health Information Support Services	Entire Health Record		Assign diagnostic codes, transcribe, file, release information, scan, and provide or input registry data
☐	Quality, Oversight and Investigations	Entire Health Record		Address medical inspections, investigations, complaint review and resolution, quality reviews, patient safety reviews, compliance, and provide congressional response
☐	Chief of Police	Limited Health Record	79VA10P2, 24VA10P2	Reviewing Patient Inquiry
☐	Police and Security Service	No Need for access to PHI		Security functions
☐	Information Security, Privacy, Compliance, VISN Staff, Patient Advocate	Entire Health Record including research records		Monitoring and tracking of security privacy and compliance issues
☐	Operations Support	No need for access to PHI		Internal operations.

	Functional Categories (Class of Persons)	Type of Protected Health Information Accessible	Allowable Systems of Records for Limited Access	Conditions for Access to Information
☐	Leadership and Management	Limited access, where necessary to complete assignment	24VA10P2, 79VA10P2, 121VA10P2 and any other system of records with national data.	Operation and management, executive decisions for health care operations
☐	Non Health Information Administrative Support	Limited Health Record, where necessary to complete assignment	79VA10P2, 24VA10P2	Administrative, public, and employee support
☐	Environmental Support Staff	No need for access to PHI		Maintenance of grounds and buildings
☐	Information Technology	Limited Health Record, where necessary to complete assignment	79VA10P2, 24VA10P2, 121VA10P2 and any other system of records for an IT system.	Maintenance and support of computer systems.
☐	Veterans Canteen Service	No need for access to PHI		Retail and food services for employees and Veterans
☐	Volunteer Services	Limited Health Record	79VA10P2, 24VA10P2	Transportation and other services

By signing this document I acknowledge and understand that I have been assigned the functional categories listed above and given computer access and VistA menu options if applicable to access and use Protected Health Information only in the performance of my official job duties and assigned task.

Employee's Signature:	Date:
Supervisor's Signature:	Date:

☐ Interim Review for Position Change ☐ Interim Review for Job Assignment Change

The following changes have been made to employees' functional category:

☐ No changes made, functional category and menu options to remain the same for this fiscal year.

Employee's Signature:	Date:
Supervisor's Signature:	Date: