

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

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FROM: Pierre Lauffer

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Meeting Participants:

- OEEB- Dr. Virginia Guidry, OEEB Branch Head Dr. Atul Goel, OEEB Medical Consultant Pierre Lauffer, OEEB Industrial Hygiene Consultant
- UNC- Steve Finch, Vice President of Operations Stephenie Fenton-Wilhelm, Vice President for Risk Management Mike Elks, Director Plant Engineering Kimberly Baer, Director Accreditation and Regulatory Affairs Kayla Moore, Clinical Operations Support Katy Strauss, Accreditation Dr. Erica Pettigrew, Occupational Health Medical Director Emilie Hendee, Associate Legal Council Pat Boone, Director Environmental Health and Safety Chuck Scott, Facilities Dr. Herbert Whinna, MD PhD, Director of the McLendon Clinical Laboratories

Overview

Staff working in the Laboratory Administration offices in the UNC Women's Hospital have expressed concern about whether there could be environmental hazards associated with cancers that have been diagnosed in staff members over a period of 20 years.

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LOCATION: 5505 Six Forks Road, Building 1, Raleigh, NC 27609 MAILING ADDRESS: 1912 Mail Service Center, Raleigh, NC 27699-1912 www.ncdhhs.gov • TEL: 919-707-5900 • FAX: 919-870-4829 On January 23, 2024, the Occupational and Environmental Epidemiology Branch (OEEB) of North Carolina Division of Public Health accompanied University of North Carolina Hospitals staff to conduct an inspection of these offices, located on the first floor of the Patient Support Tower (PST) at UNC Women's Hospital at 101 Manning Drive, Chapel Hill, North Carolina. The purpose of the visual inspection was to investigate potential indoor air quality (IAQ) issues that may be present in this work area.

It is important to note that this was a general visual inspection to identify potential concerns with indoor air quality and did not involve focused assessment or testing for any specific chemical or environmental contaminant.

Background

The Laboratory Administration area is located on the north side of the building on the first floor. This section of the hospital was built and occupied in 1982 and retains much of the original design. Through the years, the PST has been essentially built onto and encompassed by surrounding building wings that make up the UNC Women's Hospital - an example is the Anderson Building located on the east side of the PST.

The interior offices are mostly carpeted and the hallways are tiled. The section of the building where these offices are located has not changed in usage. They have always been administration offices and were never used as laboratory space, nor have they ever been used for hazards storage. Offices appear to be well ventilated, with each office possessing an air return and supply.

With respect to ventilation, a large air handler unit and fans in the basement of the PST pull and push air into vertical ducts that then branch off into individual areas of the building. This system is very well maintained with a strict maintenance schedule. Air filters for the air handler are switched out and dated on a regular basis. The filters themselves are industrial rated with a minimum efficiency reporting value (MERV) rating of 14 and contain an attached dust bag for removing all particulates from the air. These are high efficiency particulate air (HEPA) filtering systems.

This is a university hospital that requires a strict maintenance schedule to obtain and maintain accreditation. Though there may be some deferred maintenance, the hospital systems must be maintained and kept up to date.

Visual Inspection

Upon entering this area of the building, we were not able to sense any odors that would lead us to focus on specific hazards or chemicals to which workers could be exposed. While walking through the offices, we did not observe any moldy areas or water stains that would indicate water leaks. We further observed that each office possessed an air supply, as well as an air return that would prevent an accumulation of stale air. The vents were well maintained and clean. A special focus was on the interior wall offices located away from the hallways and outside walls where air could become still and stale making indoor air quality issues more likely. We did not observe any change in conditions from one zone to the next or other issues.

We also took special notice of those offices sharing the same walls with laboratories. For example, located to the east side of the office area and on the other side of the wall is the Transplant Services Laboratory. We reviewed whether there were any hazardous substances

stored along that wall that could have seeped into the administration areas. No hazards were stored in any of the rooms along the wall opposite the Laboratory Administration Offices.

The inspection team did not observe any issues suggesting indoor air quality problems with the workplaces in the Laboratory Administration Office area. We did not identify any hazards or chemicals that would be likely to cause health impacts to staff working in these offices.

Recommendations

- 1. Continue to maintain good indoor air quality throughout the hospital.
- 2. Record the maintenance schedule and date of service for the air handling unit and filters on each individual unit. Also, maintain a written schedule in a centralized location.
- 3. Maintain a building lifecycle maintenance program that facilitates proactively maintaining and replacing facility sub-system parts as they reach the end of their lifecycle.
- 4. Continue to work with NIOSH on a health hazard evaluation.

This report will be shared with the National Institute for Occupational Safety and Health to assist with the health hazard evaluation that has already been requested to provide assistance addressing concerns regarding cancer diagnosis among staff members.

Please feel free to contact Pierre Lauffer, Industrial Hygiene Consultant Supervisor, at (919) 707-5962 with any questions.