

RISK MANAGEMENT...

managing risk with responsibility

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July 10, 2008

Signature on File

TO: Israel Canales, Manager
Administrative Sites

FROM: Edward See, Project Manager
Risk Management Department

SUBJECT: Indoor Air Quality (IAQ) Assessment
Portable R-20 and 819CXD

<u>For Custodial Supervisor Use Only</u>	
<input type="checkbox"/>	Custodial Issues Addressed
<input type="checkbox"/>	Custodial Issues Not Addressed

On July 9, 2008 I conducted an assessment of Portable R-20 and 819CXD at **HRD Administration**. This evaluation included observations of the flooring system, ceiling tiles, false ceiling plenum, environmental surfaces, interior and exterior walls, and the accessible ventilation equipment. Additionally, environmental parameter measurements were taken to include temperature, relative humidity, and carbon dioxide. The detailed findings, along with the recommended corrective action can be found on the attached IAQ Assessment Worksheets.

The IAQ assessment did identify one or more existing conditions impacting IAQ and has generated appropriate work orders to correct deficiencies in systems and maintenance that could contribute to decreased indoor air quality. At the time of the assessment, these concerns were not an immediate health or safety concern to building occupants. However, due to individual sensitivities and predisposing health factors, it is possible that some building occupants may elicit a health response to agents and / or conditions identified during the evaluation. Therefore, to further improve IAQ, prevent development of future IAQ-related problems, and to reduce the potential for IAQ-related complaints by building occupants, the IAQ Assessment Team recommends appropriate follow up of each item identified and listed in the attached evaluation.

Please ensure that your Head Facilities Serviceperson receives a copy of this correspondence so that the recommendations requiring their attention can be addressed. Within two weeks a representative from the Custodial/Grounds Department will conduct a follow-up visit to ensure that all issues have been appropriately addressed.

Should any questions arise, or if the current concerns continue after the attached recommendations have been addressed, please feel free to contact me at 754-321-3200.

cc: Gracie Diaz, Assistant Superintendent
Deborah Eggelation, Operations Supervisor
Jeffrey S. Moquin, Director, Risk Management
Israel Rodriguez-Soto, Project Manager, Facilities and Construction Management
Mark Dorsett, Manager 1, Physical Plant Operations Division, Zone 1
Roy Norton, Manager Custodial/Grounds, Physical Plant Operations Division
Robert Krickovich, Coordinator, LEA, Facilities and Construction Management

ES/tc
Enc.

IAQ Assessment

HRD Administration

Location Number
 Evaluation Requested
 Evaluation Date

Time of Day

Outdoor Conditions Temperature Relative Humidity Ambient CO2

Fish	Temperature	Range	Relative Humidity	Range	CO2	Range	# Occupants
<input type="text" value="PB-R20"/>	<input type="text" value="78.5"/>	<input type="text" value="72 - 78"/>	<input type="text" value="55.6"/>	<input type="text" value="30% - 60%"/>	<input type="text" value="516"/>	<input type="text" value="Max 700 > Ambient"/>	<input type="text" value="1"/>
Noticeable Odor		Visible water damage / staining?		Visible microbial growth?		Amount of material affected	
<input type="text" value="No"/>		<input type="text" value="Yes"/>		<input type="text" value="No"/>		<input type="text" value="Various"/>	
Ceiling Type	<input type="text" value="2 x 4 Lay In"/>		<input type="text" value="Yes"/>	<input type="text" value="No"/>		<input type="text" value="None"/>	
Wall Type	<input type="text" value="Drywall/Plaster"/>		<input type="text" value="No"/>	<input type="text" value="No"/>		<input type="text" value="None"/>	
Flooring	<input type="text" value="Carpet"/>		<input type="text" value="Yes"/>	<input type="text" value="No"/>		<input type="text" value="400 Square Feet"/>	

	Clean	Minor Dust / Debris	Needs Cleaning	Corrective Action Required
Ceiling	<input type="text" value="No"/>	<input type="text" value="Yes"/>	<input type="text" value="Yes"/>	<input type="text" value="Remove and replace ceiling tiles"/>
Walls	<input type="text" value="Yes"/>	<input type="text" value="No"/>	<input type="text" value="No"/>	<input type="text" value=""/>
Flooring	<input type="text" value="No"/>	<input type="text" value="Yes"/>	<input type="text" value="Yes"/>	<input type="text" value="Remove and replace carpet"/>
HVAC Supply Grills	<input type="text" value="Yes"/>	<input type="text" value="No"/>	<input type="text" value="No"/>	<input type="text" value=""/>
HVAC Return Grills	<input type="text" value="Yes"/>	<input type="text" value="No"/>	<input type="text" value="No"/>	<input type="text" value=""/>
Ceiling at Supply Grills	<input type="text" value="Yes"/>	<input type="text" value="No"/>	<input type="text" value="No"/>	<input type="text" value=""/>
Surfaces in Room	<input type="text" value="No"/>	<input type="text" value="Yes"/>	<input type="text" value="Yes"/>	<input type="text" value="Clean as appropriate"/>

Observations

Findings:

- Cause of water intrusion in room being repaired by Physical Plant Operations
- Multiple stained ceiling tiles were removed by the custodial staff
- Carpet damaged from leak and removed by custodial staff. Physical Plant Operations scheduled to replace carpet.
- Elevated moisture in wood floor base - 20% WME
- Water stained light fixture
- Cardboard boxes in room

Recommendations:

Site Based Maintenance:

- Replace ceiling tiles
- Thoroughly wipe down horizontal surfaces with Wexcide disinfectant solution twice a week until all items have been repaired/replaced.
- Remove cardboard boxes from room. Utilize plastic bins for storage of items.
- Continue to monitor this location for any signs of microbial growth as well as dust and debris accumulation and clean as appropriate

Physical Plant Operations:

- Evaluate cause of water intrusion and repair as appropriate
- Evaluate elevated moisture in wood floor base and expedite appropriate action
- Evaluate stained light fixture and repair/replace as appropriate

Work order J320049 in progress by Physical Plant Operations

IAQ Assessment

HRD Administration

Location Number
 Evaluation Requested
 Evaluation Date

Time of Day

Outdoor Conditions Temperature Relative Humidity Ambient CO2

Fish	Temperature	Range	Relative Humidity	Range	CO2	Range	# Occupants
<input type="text" value="P-819CXD"/>	<input type="text" value="84.1"/>	<input type="text" value="72 - 78"/>	<input type="text" value="58.8"/>	<input type="text" value="30% - 60%"/>	<input type="text" value="446"/>	<input type="text" value="Max 700 > Ambient"/>	<input type="text" value="2"/>
Noticeable Odor		<input type="text" value="No"/>	Visible water damage / staining?		Visible microbial growth?		Amount of material affected
Ceiling Type	<input type="text" value="2 x 4 Lay In"/>		<input type="text" value="No"/>	<input type="text" value="No"/>	<input type="text" value="None"/>		
Wall Type	<input type="text" value="Tackable/Homasote"/>		<input type="text" value="Yes"/>	<input type="text" value="No"/>	<input type="text" value="South Wall"/>		
Flooring	<input type="text" value="Carpet"/>		<input type="text" value="No"/>	<input type="text" value="No"/>	<input type="text" value="None"/>		

	Clean	Minor Dust / Debris	Needs Cleaning	Corrective Action Required
Ceiling	<input type="text" value="Yes"/>	<input type="text" value="No"/>	<input type="text" value="No"/>	<input type="text"/>
Walls	<input type="text" value="No"/>	<input type="text" value="Yes"/>	<input type="text" value="Yes"/>	<input type="text" value="Repair/replace as appropriate"/>
Flooring	<input type="text" value="Yes"/>	<input type="text" value="No"/>	<input type="text" value="No"/>	<input type="text"/>
HVAC Supply Grills	<input type="text" value="Yes"/>	<input type="text" value="No"/>	<input type="text" value="No"/>	<input type="text"/>
HVAC Return Grills	<input type="text" value="Yes"/>	<input type="text" value="No"/>	<input type="text" value="No"/>	<input type="text"/>
Ceiling at Supply Grills	<input type="text" value="Yes"/>	<input type="text" value="No"/>	<input type="text" value="No"/>	<input type="text"/>
Surfaces in Room	<input type="text" value="Yes"/>	<input type="text" value="No"/>	<input type="text" value="No"/>	<input type="text"/>

Observations

Findings:

- Both A/C units were turned off
- Elevated moisture in South wall - 20% WME - and visible water damage adjacent to South door and whiteboard.
- Visible gaps and microbial growth on exterior T-1-11 panels

Recommendations:

Site Based Maintenance:

- Ensure that A/C units remain on during occupied hours
- Continue to monitor this location for any signs of microbial growth as well as dust and debris accumulation and clean as appropriate

Physical Plant Operations:

- Evaluate cause of water intrusion to South wall and repair as appropriate. Repair/replace wall material as necessary.
- Evaluate exterior of portable and repair as appropriate