

**School of Life Sciences**  
**Health and Safety Management Committee Meeting**  
**27<sup>th</sup> September 2004**

**Present**

Professor CP Downes (Chair), Professor AH Fairlamb, Professor C Watts, Professor Al Lamond, Professor GM Gadd, Dr JR Elliott, Ms G Alexander, Dr JA Chudek, Mrs M Lacey, Mrs I Blair, Mr IR Leith, Ms L Grayson (Minutes), Professor CJ Weijer, Dr PM Taylor, Dr EL Newman, Dr NR Helps, Dr IG Scragg (Safety Services).

**Apologies**

Professor CA Tickle

**ACTION**

**1. Minutes of previous meeting**

The minutes were approved.

**2. Matters Arising**

**a) H&S Policy & Guidance for Undergraduate Students**

Ms Grayson and Mrs Lacey made the necessary amendments/additions to the SLS H&S Policy to ensure it adequately covers the H&S roles and responsibilities relating to undergraduate teaching. The revised document was accepted by LSTU and signed off by CPD on 5/7/04. Dr Elliott confirmed LSTU's acceptance of the document. Prof Downes explained that full Committee approval was not sought before issue because amendments applied solely to H&S in undergraduate classes. There were no objections to this course of action. The new version of the H&S Policy has now been copied to key personnel and all previous versions withdrawn.

Ms Grayson and Mrs Lacey produced a one page undergraduate's guide to laboratory safety and a one page guide to laboratory hazard warning symbols. Both documents were approved by LSTU and are now included in all LSTU module handbooks. Documents were commended by Prof Downes.

The proposed undergraduates' 20 minute H&S training session is not ready for delivery. Ms Grayson explained that other tasks had taken priority and suggested aiming for full implementation of the training program by the start of the next academic year. Dr Elliott and Mrs Lacey agreed that this would be an appropriate time to aim for. Mrs Lacey and Ms Grayson to ensure target is met.

**LG/ML**

Currently, risk assessments for practical classes are brought to the attention of the undergraduate students via a verbal run through by the senior member of staff in charge of the class. It was agreed that it would also be desirable to make the risk assessments available in VLE. The short term aim is to scan the current hardcopy assessments into PDF format for uploading to VLE. Ms Grayson and Mrs Lacey are currently dealing with this and expect to complete the task within the next 2 to 3 weeks. The longer term aim is to have the risk assessments stored within the LARA System. Prof Downes asked for this to be accomplished by the next H&SMC meeting. Mrs Lacey and Ms Grayson to ensure target is met.

**LG/ML**

Mrs Lacey pointed out that 4<sup>th</sup> year project students' research lab activities have not been risk assessed and asked who should take responsibility for rectifying this. The Committee agreed that LSTU technicians should *not* be responsible for generating these assessments, since they are not involved in the work, and that research staff must take responsibility for the H&S of undergraduates working in their labs. Prof Downes suggested that rather than opting for a "quick fix" - i.e. attempt to

rapidly produce risk assessments for only the undergraduates' lab activities - it would be a better use of resources to systematically tackle any risk assessment deficit in the research labs, as per the H&SWG's existing action plan. The Committee agreed with this proposal. H&SWG to progress this issue forward. In the interim, undergraduates must receive full H&S induction and instruction and be under close supervision when working in the research labs. Prof Downes asked HoDs to take this message back to their staff.

**H&SWG**

**HoDs**

It was agreed that Demonstrators must read and sign the risk assessments for all LSTU practical classes they are involved in. LSTU staff will supply the risk assessments. Demonstrators will also be expected to attend the undergraduate H&S training session (once it is up and running) and must set an example to the students by adhering to good laboratory practice at all times. LSTU staff to ensure these requirements are fulfilled.

**JE/ML**

## **b) Measuring Performance**

Ms Grayson informed the Committee that she found it difficult to envisage the principals outlined in the HSE document "A Guide to Measuring Health & Safety Performance" applying to the SLS H&S Management System as it currently stands. She felt resources should be targeted at the "Organising" and "Planning & Implementing" stages, before moving on to measuring performance. H&SWG to ensure that the "Organising" & "Planning & Implementing" phases of establishing the SLS H&S Management System are strategically tackled.

**H&SWG**

Ms Grayson did, however, propose measuring the performance of the personnel who make up our H&S Management hierarchy, in terms of how well they are fulfilling their H&S responsibilities. She pointed out that the responsibilities of H&S personnel are very clearly defined in the Policy document, thereby giving us something concrete to measure performance against. Ms Grayson asked if the fulfilment of H&S responsibilities may be included in the staff review process. The Committee supported this proposal. Ms Grayson conceded that if staff are not coping with their H&S duties it may be down to H&S responsibilities being wrongly allocated/unfairly distributed, and that this would prompt a review of the relevant section of the Policy.

## **c) Proximity Card Issue & Basic Training Checklist Completion**

Ms Grayson reported that the H&S Basic Training Checklist (BTC) program was launched on Monday 14<sup>th</sup> June 2004. Mrs Blair has received 20 completed BTCs since the launch. Ms Grayson asked the Committee to reaffirm its support for making the issue of security cards dependent upon submission of completed, signed BTC at WTB Reception. The Committee responded positively and agreed that this should be put into effect as soon as possible. H&SWG to implement.

**H&SWG**

Prof Fairlamb asked for clarification on the arrangements to ensure BTCs are completed promptly in the absence the person who normally administers induction training for a given area. Ms Grayson responded by saying that all Lab Managers can provide cover, as can she and Mrs Blair. Ms Grayson to ensure Lab Managers are aware of their obligation to provide cover.

**LG**

Dr Chudek reported that the Carnelley Lab Managers are now also using the BTC.

Dr Elliott asked for clarification on whether LSTU staff working in the Mortuary would, for the purposes of the BTC, fall into the category of Academic Personnel in LSTU or Anatomy/Mortuary Personnel. Ms Grayson and Mrs Blair both agreed it would be more appropriate for the new start to be classed as Anatomy/Mortuary Personnel, in this instance, and be taken through the BTC by whom ever Prof Black has elected as the Anatomy/Mortuary area BTC trainer.

Prof Downes pointed out that MRC/DSTT do not use the BTC. They have their own general induction checklist that includes all the BTC H&S items and more. Prof Downes felt it reasonable to allow MRC/DSTT to continue to use their own checklist providing it met with SLS standards and could be used for the same purpose as the BTC. Dr Helps informed the Committee that the MRC/DSTT checklist had been in use for some time and that he did not think it necessary to change

over to the BTC. Dr Helps did, however, agree that issue of security cards to MRC/DSTT personnel could be made dependent upon submission of a completed, signed MRC/DSTT checklist. Dr Helps to liaise with the H&SWG on this issue. **H&SWG/NH**

Ms Grayson to ensure Reception staff are fully aware of these proposals and understand that they must not issue a new recruit with a security card until they present a completed, signed copy of their BTC. **LG**

#### **d) Follow Up to Liquid Nitrogen Facility Inspections**

Ms Grayson informed the Committee that rather than conduct a repeat inspection, the H&SWG chose to hold a less formal follow-up meeting with each facility manager. Meetings were held in August/September 2004. Ms Grayson felt this exercise highlighted the importance of following up the initial inspection and that it also demonstrated that even senior support staff require detailed guidance and instruction when it comes to implementing corrective actions. Ms Grayson has drawn up a list of 67 actions resulting from these follow-up meetings. H&SWG to ensure all actions are carried out by the end 2004. **H&SWG**

Ms Grayson alluded to difficulties in getting the users of the LN2 facilities to read and sign the risk assessments provided. Prof Lamond pointed out that mass emailings are not the way to get compliance on this sort of issue. He thought the best route was for the Lab Managers to bring such issues to the attention of the PIs at the Divisional meetings. This was acknowledged by Ms Grayson. Once all risk assessments are in place, the H&SWG will use this route and report back on the success/failure at the next meeting. Ms Grayson stressed how important this issue is in light of the fact that it applies to all work activities and not just those involving LN2. **H&SWG**

#### **e) Ethical Approval for use of Human Blood/Tissue in Research Projects**

Prof Downes informed the Committee that Prof Boxer's Research Governance Framework working group last met on 19/5/04. No minutes have been issued and there has been no other communication since. Prof Downes asked Ms Grayson to contact Prof Boxer's office and ask for a status report on the RGF initiative. **LG**

Ms Grayson still to seek clarification on specific issues. **LG**

### **3. Disaster Recovery Plan**

Ms Grayson gave a short presentation summarising the key points of the Disaster Recovery Plan – as drafted by Ms Alexander - and prompting HoDs to consider their own contingency plans. It also stressed the importance of keeping the Asset Register up to date.

Prof Lamond commented that this issue has already been raised at the Research Management Group meetings.

Prof Fairlamb stressed the importance of having disaster recovery arrangements in place – a lesson he has learned through personal experience. He also recommended that the section of the document dealing with Salvage should make reference to an inventory of what is lost and not just what is salvaged. This was acknowledged by Ms Alexander.

Prof Downes asked the HoDs to raise this issue at their Divisional meetings and feedback on any matters that cannot be resolved at a local level. **HoDs**

### **4. New Version of H&S Policy & Portfolio**

The new version of H&S Policy had already been covered under Matters Arising.

The Committee was informed that the new version of the H&S Portfolio (reduced from 45 to 25 pages) went into circulation in July of this year and is now issued to all new recruits either via

Janette Cordiner's Office or the Lab Managers.

## 5. Revamped SLS H&S Website

Ms Grayson unveiled the revamped SLS H&S Website and gave the Committee a demonstration of how the site has been designed to allow quick, direct access to SLS H&S information. Ms Grayson proposes to update the site on a weekly basis and will take on board comments and suggestions from all personnel.

**LG**

Ms Grayson to email the URL to all SLS staff as soon as possible. Ms Grayson also to include a prominent link to Safety Services' website on SLS H&S homepage.

**LG**

Prof Watts asked if more obvious links to the site could be included on the Biocentre homepage. Ms Grayson to consult Angie Nicoll.

**LG**

## 6. Risk Assessment System Progress

Ms Grayson gave a progress report on the Lab Activity Risk Assessment (LARA) System project. Progress has been slow but sure, however, due to the scale of the project, much remains to be done before the System is opened up to all personnel. Prof Downes asked when the System will be fully operational and accessible. Ms Grayson said further analysis of the outstanding tasks was necessary for an accurate estimate, but this should be achieved within the next 6 months. Ms Grayson to ensure this target is met.

**LG**

## 7. Policy Arrangement for Pregnant & New Mothers

Committee approved the policy arrangement for Pregnant & New Mothers. H&SWG to inform the relevant personnel.

**H&SWG**

Dr Elliott asked if it would be appropriate to have a rest room designated in OMS/Carnelley. Mrs Blair said yes and asked Mrs Lacey, Dr Chudek and Dr Elliott to identify a room and inform her of its location and the arrangements for its use.

**ML/SC/JE**

## 8. Inspections

### a) CL2 Tissue Culture Facilities, Internal Inspection, 26/2/04

Ms Grayson reported that the H&SWG had inspected the MSI/WTB CL2 TC facilities in February of this year and that the key findings were similar to those resulting from the 2003 LN2 facility inspection: general lack of risk assessments/training records and staff not wearing the PPE provided. Some suites were also found to be untidy and in need of a thorough clean. Ms Grayson informed that the Committee that reports have been issued to the TC facility managers, identifying the necessary corrective actions, and that the H&SWG will carry out follow up inspections/meetings in February 2005.

**H&SWG**

Ms Grayson stressed that the importance of having written training records was on a par with the need for signed risk assessments. Prof Downes suggested the route proposed under item 2d should be used to ensure this issue is brought to the attention of the PIs. Prof Downes remind the HoDs that managers should lead by example and volunteered to attend a TC H&S training session. Ms Grayson suggested Lab Managers could play a key role in delivering H&S training, once they themselves are adequately trained. Prof Downes agreed and reminded the Committee that H&S duties are part of the Lab Managers remit. Prof Downes proposed that a certain percentage of the Lab Managers time\* be reserved solely for H&S related duties and asked the HoDs to consider this proposal, discuss with their PIs and report back at the next H&SMC meeting. \*To kick-start the debate, Prof Downes suggested 20%.

**HoDs**

**b) Anti-Terrorism Inspection, Tayside Police, 16/3/04**

Prof Downes informed the Committee that Prof Ferguson's lab is no longer registered as holding a Schedule 5 toxin, due to the fact the form of ricin they work with is not the active highly toxic form. Special Branch made allowances for Geoff Codd's lab in BSI, in light to the fact that it will relocate in 2005. The H&SWG are to ensure that the plans for the Codd lab's relocation take heed of all recommendations detailed in the inspection report.

**H&SWG**

**c) WTB1 & WBRU CL3 Facilities, SEERAD Inspection, 9/9/04**

Dr Newman and Dr Scragg informed the Committee that this inspection passed without incident. Dr Newman said a couple of minor waste management issues cropped up but they can be easily resolved. Prof Downes commented on how invaluable Prof Fairlamb's CL3 expertise and knowledge are to the School.

**9. Accident Statistics for 2004**

Prof Downes expressed an interest in any trends developing from year to year. Mrs Blair indicated a definite increase in the reporting of near misses and explained why this is a welcome statistic. Prof Downes also expressed concerns over the relatively large numbers of PhD students involved in accidents/incidents and stressed that we are obliged to protect our most inexperienced and, therefore, vulnerable personnel groups. Mrs Blair commented that technicians also appear more accident prone but this may be down to better reporting within this staff group.

**10. AOCB**

Prof Weijer raised the issue of DSE risk assessment. Ms Grayson and Mrs Blair explained progress in this area has been minimal due to the scale of the problem and lack of any definite strategy for tackling it. Prof Downes asked for this item to be tabled on the next H&SMC meeting agenda and for the H&SWG to clearly define the scale of the problem, propose a strategy for tackling it and identify the priority actions.

**H&SWG**

Dr Scragg commended the work done by the H&SWG. Prof Downes did likewise and acknowledged the vast improvements made in the management of H&S within the School over the past couple of years. Dr Scragg offered Safety Services continued support and reminded SLS of Safety Services' comprehensive training program and the opportunity to have training tailored to suit our requirements, as and when necessary. Prof Downes acknowledged this and thanked Dr Scragg.