

SLS H&S Working Group Meeting Minutes

Held on Friday 25th March 2005 at 2pm in WTB Meeting Room 111

Present

Lisa Grayson (LG)
Irene Blair (IB)
Monica Lacey (ML)
Gail Alexander (GA)

Apologies

Aileen Watson (AW)

Action
<p>1. Previous Minutes</p> <ul style="list-style-type: none"> • Accepted as a true and accurate account. <p>Matters Arising:</p> <ul style="list-style-type: none"> • 31st October 2003 <ul style="list-style-type: none"> 8. AOCB <ul style="list-style-type: none"> viii. Mortuary H&S material still to be forwarded to Sue Black for her comments. Risk assessments still to be done. LG • 28th May 2004 <ul style="list-style-type: none"> 3. AOCB <ul style="list-style-type: none"> vii. IB still investigating labels for non-spark-proof fridges/freezers. IB to prepare justification for £4.3k label/sign printer purchase and present to IRL. IB • 25th June 2004 <ul style="list-style-type: none"> 5. AOCB <ul style="list-style-type: none"> vii. LG still to pursue VHP option. Not a priority at the moment. LG • 28th July 2004 <ul style="list-style-type: none"> 6. AOCB <ul style="list-style-type: none"> ii. IB has commented on the risk assessment for collecting water samples from freshwater lochs. GA to add info on tick hazard/risks/controls. IB still in the process of doing SOPs and RAs for Media and Wash-Up areas. GA iii. LG and IB to work on H&SWG tasks arising from TC inspection over next few months. IB • 24th August 2004 <ul style="list-style-type: none"> 6. AOCB <ul style="list-style-type: none"> vii. LG still to email Bill Reynolds and invite him to look at some of the worst affected PAT labels to clarify exactly what the problem is. LG x. IB to give RA and SOP to EM and NMR staff accessing 1st floor roof and ask them to sign RA. IB xi. IB still to draft an SOP for suspected release of harmful gas/vapour in Wash-Up area to ensure such an occurrence is always responded to appropriately. IB • 1st October 2004 <ul style="list-style-type: none"> 5. AOCB <ul style="list-style-type: none"> iii. LG still to consult the O2 monitor manufacturer on the issues that came to light on 7/3/05 and report back to the Group. LG • 5th November 2004 <ul style="list-style-type: none"> 2. Gas Cylinder/Regulator Action Plan <ul style="list-style-type: none"> ii. Sandy Chudek confirmed that the Carnelley fire arrangements are up to date, but ML explained that the copy of the building plans, kept for issuing to the Fire Service, still needs to be updated. ML and Sandy to deal with this. ML IB & LG to fix a date for completing Gas Cylinder/Regulator inspection and issuing the checklists & serial number/test date stickers. IB/LG 6. Monthly Review of Incident/Accident Reports <ul style="list-style-type: none"> iii. LG still to confirm that CL3 tritium procedure has been reviewed and modified. LG

- **28th January 2005**
 - 7. Pregnant Mothers: H&S Officer's Checklist**
 - i. See item 3 of today's agenda.
 - 8. Changes to SLS H&S Web Site**
 - ii. IB emailed the current version of her induction presentation to LG. File did not open. LG to get copy at next H&S Induction. LG
 - 10. AOCB**
 - ii. IB still to arrange a manual handling course. IB
- **25th February 2005**
 - 2. H&SMC – actions from previous meeting and date/agenda for next meeting**
See item 2 of today's agenda.
 - 3. H&S Training – recent ventures and future plans**
See item 2 of today's agenda.
 - 4. Biological Material – revised waste disposal routes and spill procedure**
 - i. IB and LG met with Martin Rollo on 28/2/05 and secured his approval of the disposal routes for biological waste.
 - ii. Information is now on H&S web site and Lab Managers have been informed. All staff have now been informed by email.
 - iv. Ian Scragg has given his approval for the biological material spill procedure.
 - vi. LG still to inform Lab Managers of revised material. Will do this at their next meeting. LG
 - 5. SLS Risk Assessment System**
See item 2 of today's agenda.
 - 6. Monthly Review of Accident/Incident Reports**
 - ii. Staff still to be reminded of the risks associated with the use of UV light sources.
 - iii. IB and LG agreed that the SOP for dealing with spills of TC/micro-org waste in the Wash-Up area should be based on the existing biological material spill procedure, but simplified as far as possible. IB and LG still to meet to discuss this further. IB/LG
 - 7. AOCB**
 - i. ML reported that the case of the psychologically disturbed student is being dealt with by LSTU senior management. Ian Scragg has contacted Student Services to ask what support they are providing to the student in question.
 - vi. LG still to investigate the implications of Personal Emergency Evacuation Plans (PEEPs) in SLS. LG
 - vii. IB arranged for the stack of wooden palettes by the WTB Stores entrance to be removed and for the Porters to keep a regular check on this.
The issue of smoking outside SLS buildings will be raised at the H&SMC meeting.
ML to notify E&B about the lack of No Smoking signs in the Carnelley/OMS link block. ML
 - viii. Sandy Chudek informed LG that he does not wish to pursue the issue of mentioning Honours students in the Lone/Out-of-Hours Working policy.
- 2. Update on H&S Management Committee Tasks**
 - i. H&SMC meeting is scheduled for 14/4/05 at 10am in the Board Room. Pre-meeting with CPD scheduled for 13/4/05 at 11am in CPD's office.
 - ii. Update on priorities arising from the previous H&SMC meeting:
 - a. LG and ML met to discuss LSTU practical class risk assessments on 11/3/05. An action plan has been agreed. LG to finalise and present to the H&SMC. LG
 - b. Meeting between LG, IRL, IB and GA to discuss allocation of H&S Management responsibilities took place on 18/3/05. Proposals were put forward by LG as a starting point for discussions. IB, GA & IRL needed time to analyse papers and consider proposals. Group reconvened on 25/3/05 and agreed to the proposals in principal. IB, LG and GA need to meet to finalise the details. LG to prepare a report for the H&SMC, outlining what has been agreed to so far. LG
 - c. Janette Cordiner has agreed to supply a list of new starts at the end of each month. Janette's list will not include undergraduate students or visiting workers. Will Whitfield can supply a list of undergraduates doing project and summer work. Lab Managers will have to be relied upon to provide the names of visiting workers. LG to prepare a paper outlining how the system will operate. LG
IB/LG to get a list of new starts from 1/1/05 to 31/3/05 and determine how many have completed a BTC. Figure to be brought to the attention of the H&SMC. IB/LG
 - d. Fiona Hogarth/David Boxer issued a draft University Ethics & Research Governance Policy in March. The RGF Working Group are to review and comment at the next

meeting on 21/4/05. This meeting will provide an opportunity to get clarification on any outstanding issues.	LG
e. LG has issued several emails referring staff to the H&S web site and will continue to do so.	
f. See item iii for Risk Assessment actions.	
g. There is not enough time to complete the LN2 Inspection actions, TC Inspection actions or Gas cylinder/regulator inspection before the H&SMC. LG proposed that the Group admit to this and make these tasks a priority over the coming months. Group agreed.	LG/IB
h. See item iv for H&S training actions.	
i. DSE workstation and DSE training statistics will be collated week commencing 4/4.	LG/IB
iii. Risk Assessment System Tasks:	
a. GA forgot to ask Hilary Kay Young about the micro-organism and blood & tissue assessments. Ian Scragg offered to help, but he is now on holiday until 4/4. LG proposed that the Group could approve assessments derived directly from MSDS, leaving only a few to be approved by Ian Scragg on his return from holiday. Group agreed. LG to enter approval data and see Ian Scragg ASAP.	LG IB/LG
b. LG and IB met on 3/3/05 to finalise and approve all SOPs. Only a couple still to be approved.	IB/LG
c. LG and IB met on 3/3/05 to finalise/revise and approve current risk assessments. Only a couple still to be approved.	
d. Manual Handling help page has been completed.	
e. The 58 old format CHAs are still to be revised. LG did not think this should delay the launch of the System, as long as it is made clear that assessments without approval dates are not valid. Group agreed. Unapproved CHAs will be approved as time allows.	All LG
f. LG to open system up to all SLS personnel before the next H&SMC meeting.	
iv. H&S Training Tasks:	
a. LG still to discuss Official DSE User issue with Safety Services.	LG IB/LG
b. IB/LG to present attendance statistics for H&S video training to H&SMC. Statistics will be collated week commencing 4/4. Poor attendance by research staff will be clearly illustrated.	
c. LG notified all personnel of the monthly H&S video sessions on 24/3/05.	
d. LG will issue email on 4/4 informing relevant personnel of Biological Safety course on 27/4.	LG
e. Safety cabinet video was shown during week commencing 14/3/05.	
f. IB and LG to work on risk assessment training session for core support staff.	IB/LG
g. The majority of Lab Managers thought the Radman course was worthwhile and that Nancy Kirk and Ewan Starke should attend. LG is still concerned about the cost and feels that the money could be better spent. IB and GA suggested checking the cost of running the course in SLS and, if there is little difference, using it as an opportunity to provide refresher training for all RPSs and Deputies. LG to investigate and discuss with IRL.	LG
h. The Contamination Control video was shown during week commencing 21/3 and was relatively well attended. Attendance statistics will be presented to the H&SMC.	IB/LG
i. LG discussed re-starting the in-house RPS training program with Martin Rollo. Martin is happy to do this. LG to pursue this in May 05.	LG IB/LG
j. Only LN2 training has not been tackled. This must take priority after the H&SMC meeting.	
3. Trial of H&S Officer's Checklist for dealing with Pregnant Mothers	
i. LG trialled the Checklist during two recent cases and it proved very useful.	
ii. LG felt that the Data Protection issue had not been adequately addressed and has now added a clear DP statement to the risk assessment form and added DP information to the introductory paragraph at the start of the Checklist.	
iii. LG also made minor amendments to the policy document to make it clear that line managers are not informed as a matter of course, but only with the consent of the pregnant mother.	
iv. LG stressed the need to securely store hardcopy <i>and</i> electronic files containing personal data.	
v. LG asked Kirsten Paterson about the length of time Pregnant Mother's risk assessments should be stored. Kirsten thought 5 years was reasonable but it may be necessary to keep them for up to 40 years. Records should be kept indefinitely until a firm answer is forthcoming.	

4. Monthly Review of Accident/Incident Reports

- i. No significant accidents or incidents occurred during March 05.
- ii. ML and IB noted that the Accident/Incident Investigation form is very useful, especially for near misses.
- iii. IB to email Accident Book holders to remind them to use the Investigation forms.
- iv. LG to amend Accident/Incident Reporting policy to include this.

IB
LG

5. AOCB

- i. ML reported that two members of staff have had a bad reaction to the hand soap used in the toilets in the Carnelley Building. IB was not surprised as this has already occurred in MSI/WTB. IB to contact Heather Adams and arrange for a hypoallergenic soap dispenser to be installed in the Carnelley toilets.
- ii. IB confirmed that Mike Hannan and Donald Gardiner have both attended the Manual Handling Risk Assessment course.
- iii. ML is concerned that LSTU staff will be left to clear up behind the Chemists when they relocate to CIR. Group were adamant that this should not happen, having witnessed the state OMS was left in. Group felt that Terry Sweeney, Gina McKay and Jenni Paterson should take responsibility for ensuring that the Carnelley Building is cleared of everything that is not required by LSTU. IRL to take note.
- iv. ML reported that the SEPA Inspection in OMS and the LSTU lab in BSI went well. The Inspector was very impressed with the record keeping. ML noted a few key points:
 - When radioactive waste sinks are decommissioned the Inspector wants to see monitoring results for swabs taken from inside the U-bend;
 - Swabs taken to establish background must come from areas well away from the lab benches, where contamination is not possible;
 - Monitoring records should state counts rather than just a yes/no or a tick;
 - Staff must be able to explain how waste figures are derived.
- v. IB proposed that choosing an H&S topic for communicating to all staff should become a regular item on the agenda. Group agreed. LG to include on agenda from now on.

IB

LG