

SLS H&S Working Group Meeting Minutes

Held on Friday 29th August 2003 at 2pm in Meeting Rm 111, WTB

Present

Irene Blair
Lisa Grayson
Monica Wilson

Apologies

Aileen Watson
Gail Alexander

	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"> • 29th November 2002 <ul style="list-style-type: none"> ○ Report on Mortuary Visit <ul style="list-style-type: none"> ➢ Lisa & Irene still to consider how to demarcate clean & dirty areas. Postponed until end of August. • 2nd July 2003 <ul style="list-style-type: none"> 4. Review of Generic LN2 Inspection Report <ul style="list-style-type: none"> ii. See item 4 of today's agenda. 5. Laboratory Hazards Summary Sheet <ul style="list-style-type: none"> i. Sandy & Monica have received a copy. 6. Latest on Visitors Procedure <ul style="list-style-type: none"> i. Still waiting for RMG's decision on badge issue – due early September. Early indication is that PIs will not agree to badge scheme (and are also opposed to wearing of staff ID/student matriculation cards). ii. Lisa still to incorporate MRC visitor information into the SLS visitor's sheet or procedure document. • 29th July 2003 <ul style="list-style-type: none"> 2. Truncated H&S Portfolio Latest <ul style="list-style-type: none"> i. Security document <ul style="list-style-type: none"> 🔒 Statement on the requirement to wear ID badges: changed "must" for "should". 🔒 Lisa still to copy to Richard with an explanation of our stance. vi. Policy document <ul style="list-style-type: none"> 📄 Reshuffle and new appointments: letters drafted. Lisa to issue to Ian & Irene for checking then, if OK, issue to all concerned. 📄 Still to forward to Pete Downes for his approval and signature. Group agreed Pete should sign the Policy as a separate doc and not part of the Portfolio. ix. Lisa has spoken to Janette Cordiner and she does not necessarily want all induction information in one handbook, but she thinks her office should issue all standard induction material in one "pack". Letty Gibson has arranged a meeting, scheduled for 3/9/03, to discuss the induction pack issue. 3. Target for Next H&SMC Meeting <ul style="list-style-type: none"> vi. Development of training program relating to basic training checklists still to begin. 4. Summer Students <ul style="list-style-type: none"> Irene still to ask Ian Leith if a memo could be issued to all SLS Group Leaders asking them to ensure Janette Cordiner's office is notified of all "visiting workers", 	<p></p> <p>LG/IB</p> <p></p> <p>IRL</p> <p>LG</p> <p></p> <p>LG</p> <p>LG</p> <p>LG</p> <p></p> <p>LG/IB</p> <p>IB</p>

including undergraduate students, however short the duration of their stay. Janette can then notify the relevant BHSO. (This could be covered at the “Induction Handbook” meeting?)

5. Hydrofluoric Acid

- i. Irene now has a supply of calcium gluconate gel.
- ii. Lisa and Irene have met with Zhao to discuss hazard data/procedure. Zhao has ordered PPE, spill kit, etc and drafted a risk assessment. Lisa to check assessment and put into LARA database. Kaera Jarvie has agreed to be first aider on call. Lisa suggested extra neoprene gloves are available in case other personnel have to assist in an emergency.

LG/IB

2. LARA System

- i. Lisa reported that she had used the LARA System to produce risk assessments for one of Paul Crocker’s procedures.
- ii. She was happy with the result from this first attempt, but much work remains to be done, especially on the COSHH element.
- iii. Lisa to issue assessment to H&SWG members to allow them to review and comment (asap).
- iv. Lisa to arrange meeting with Safety Services to give progress update.

All

LG

3. Truncated H&S Portfolio

- i. Lisa went through the minor amendments that have been made since the last issue.
- ii. Official issue date to be set at Induction Pack meeting on Wed 3rd.
- iii. Lisa to issue portfolio to all core tech, including LSTU.
- iv. Group agreed that it should not be issue to all existing staff, at least in the first instance.

LG

4. Liquid Nitrogen Inspection Report

- i. Initial intention was to issue LN2 inspection report on 1st September, along with example risk assessments, revamped SOPs, PPE inspection record, training record and copy of SS COP. However the associated tasks, although in progress, have not yet been completed.
- ii. Group agreed to postpone issue of report by one month.
- iii. Lisa/Irene to ensure tasks are completed by 1st October.
- iv. Completion dates for actions assigned to the Person Responsible” will be adjusted accordingly.

LG/IB

LG

5. Safety Services Waste Disposal Proposals

Discussion deferred until next pilot scheme is underway on WTB1 & 2.

6. Accident/Incident Reports

- i. A member of DSTT staff dropped a beaker of buffer, containing mercaptoethanol, while exiting the cold room. Individual was wearing own spectacles (not safety glasses) but buffer still splashed into eyes and caused some discomfort. Rinsing with cold water relieved the stinging sensation and no hospital visit was necessary.
- ii. Two members of Cheryl Tickle’s group have reported arm/back pain that they believe to be linked to work activities. Lisa and Irene carried out a preliminary investigation, followed up by a visit from Kirsten Paterson. Kirsten’s recommendations are being considered and some corrective measures have already been implemented. Lisa and Irene to pursue until problems are resolved.

LG/IB

7. AOCB

- i. Issue of “Out-duction” was raised at last Lab Manager’s meeting. Group agreed that an official Out-duction procedure would be useful, especially for admin purposes. In terms of H&S, including a way of confirming Cat3 users have given a final blood sample would be useful. This will be discussed at the meeting on Wed 3/9.

LG/IB

