

SLS H&S Working Group Meeting Minutes

Held on Friday 30th April 2004 at 2pm in Rm 111, WTB

Present

Lisa Grayson (LG)
Monica Lacey (ML)
Irene Blair (IB)
Aileen Watson (AW)

Apologies

Gail Alexander (GA)

Action

1. Previous Minutes

- Accepted as a true and accurate account.

Matters Arising:

• **29th July 2003**

4. Summer Students

LG asked lab managers (on IB's behalf), at their meeting on 28/4/04, to monitor and report any instances of personnel commencing work without any formal induction.

• **31st October 2003**

2. Visitors Procedure and Information Brochure

- iv. Lisa still to post on website and inform Reception and other admin staff as appropriate.
- v. ML still to see Sandy Chudek about designating an OMS/Carnelley office as a temporary reception. ML suggested LSTU office be used. ML to OK with Lesley Blyth.

LG

ML

8. AOCB

viii. LG still to forward Mortuary H&S material to Sue Black for her comments.

LG

• **28th November 2003**

3. H&S Policy & Guidance for LSTU Staff & Students

- v. Update of Portfolio in progress. Will include clear guidance on H&S induction/training for 4th year project students working in research labs and other personnel groups.

LG

• **30th January 2004**

4. Risk Assessment for Pregnant/Nursing Mothers

- i. LG still to email copies of risk assessment to Group.

LG

5. H&S Policy & Guidance for LSTU

ML to confirm to LG that LSTU have accepted revised policy and proposals.

ML

6. TC Suite/CL2 Inspection Checklist

TC suite inspection held on 26/2/04. LG to complete and collate outcomes.

LG

8. H&S Budget

- iii. IB still to check on usage of current H&S account.
- iv. LG spoke to Kiran Oza re requirement for new server w/c 26/4/04. Kiran said there was no requirement for a new server at the moment but updated software may be needed. LG asked Kiran to inform her if funds were required.

IB

9. Comments on Previously Issued Documents

- ii. LG and IB met with Kirsten Paterson on 7/4/04 to discuss PTW documents and Waste Disposal guidance. See AOCB of today's minutes for details.

• **27th February 2004**

2. Yellow Bag Pilot Status

- i. Yellow bag scheme expanded on 5/3. No major problems reported so far.
- iv. LG amended yellow bag email to ensure MRC/DSTT and other SLS instructions concur.
- v. Separate disposal route for empty chemical containers will be considered as part of waste flowcharts exercise (see AOCB of today's minutes).
- vi. Local rules will be updated as part of waste flowcharts exercise (see AOCB of today's

minutes).

3. Safety Services Demand for Weekly Checks on Fume Hoods

- i. LEV register updated and Lab Managers and BHSOs informed of requirement for monthly fume hood/LEV checks and where to get new labels.

4. Basic Training Checklists

See item 2 of today's agenda.

5. LARA System Update

See item 3 of today's agenda.

7. Monthly Review of Accident/Incident Reports

- i. Member of technical staff suffering from sensitisation to fixer and developer has been relieved of auto-developer maintenance duties on Dr Dymock's recommendation.
- ii. Risk assessments have been updated for two members of staff suffering from WRULD. Several changes have been made to workstations and further options are being investigated. Line Managers have been notified.

8. AOCB

- i. H&S Induction seminar held on 17/3/04.
- iii. Anti-Terrorism Inspection carried out on 16/3/04. No major problems. Awaiting report.

2. Basic Training Checklists (BTC): cut-down version

- i. LG has cut the BTC down to a more manageable size for first day induction.
- ii. Material removed from the BTC will be added to the Portfolio and/or Induction Seminar.
- iii. LG to revise Portfolio.
- iv. LG and IB to run Induction Seminar more frequently, i.e. fortnightly or perhaps even weekly if seminar can be recorded and played back on DVD. LG & IB to investigate.
- v. MRC/DSTT have own checklist, therefore, dropped from BTC distribution list; although Nick Helps will continue to receive copies for information only. Garland & Kinastone also dropped.
- vi. LG and IB to do mock induction to check process is not too time consuming – aim for <=20min.
- vii. Group agreed that BTC, Notes for Trainers document, covering memo and proposed distribution list were acceptable and should be issued as is. LG to issue.
- viii. If BTC proves a success, issue of swipe cards will become dependent upon presentation of signed BTC to issuer.

LG

LG/IB

LG/IB

LG

3. LARA System: latest developments

- i. Based on CHA pilot phase and own attempts at risk assessments, LG & IB do not think the current RA approach is workable in SLS – scale of problem is too big. Current system does not have to be abandoned but an alternative, less detailed, less time consuming approach is required to cover all the lower risk activities. The current, detailed assessment method could be reserved for medium to high risk activities.
- ii. LG issued the revised risk assessment for formaldehyde fumigation of MSCs to illustrate use of the current system for risk assessment of higher risk activities. Group were impressed with the risk assessment, but agreed it would be too onerous to assess all lab activities separately and in such detail.
- iii. Group have agreed to suspend pilot scheme until an alternative approach is devised and tested. LG and IB to work on this.
- iv. LG reported that there are now over 30 SOPs in the LARA database and asked how the approval process should operate. Group agreed that IB and LG should check and approve current SOPs, calling on input from others as required.
- v. LG noted that in quite a few Chemical Hazard Assessments (CHAs) the "dust mask" option, in the PPE section, had been checked. Group agreed that the use of a dust mask was not advisable because it affords no protection to anyone other than the person wearing it. In most instances, use of LEV would be more appropriate. However, dust masks may be necessary in the event of a spill. Group agreed CHAs should reflect this policy.
- vi. Group also agreed that if an MSDS gives **no** Hazard ID or risk phrases, not even R99 (or some other declaration of its non-hazardous status), the substance should be assigned an HR of 2, unless other information (or personal experience) suggests it should be rated as a 1 or 3.

LG/IB

LG/IB

4. Policy Arrangements: requirement for summary document

- i. LG brought the Safety Reporting by Line Managers policy to the attention of the Group. SLS has been asked to trial the scheme. Group need to complete a report on behalf of CPD. IB and LG's preliminary attempt suggests this will not be straight forward.
- ii. LG suggested that a good starting point would be to produce a summary of our arrangements, as per the Unit H&S Policy template in Safety Services' "Presentation to Deans of Faculties" folder. IB and LG to work on this.

IB/LG

5. Monthly Review of Accident/Incident Reports

- i. IB gave an account of March & April's accident/incident reports.
- ii. Most notable was a second hypoglycaemic attack – same victim as last time. Staff in the vicinity find these episodes alarming, but the victim is upset by the fuss and has made it clear that they do not want an ambulance called. IB stressed that, in general, if a person falls unconscious an ambulance should be summoned immediately.
- iii. Another member of staff fainted (second occurrence) in their office. An ambulance was called but the victim had regained consciousness by the time it arrived and refused to go to hospital or see their GP. They did, however, agree to be taken home and were subsequently off sick for a couple of days.
- iv. IB noted that in one incident an ambulance took over 1 hour to arrive. This has been reported to the appropriate person(s).

6. AOCB

- i. ML expressed concern over unofficial reports of considerable amounts of mercury in the Carnelley drainage system. Group were unsure as to whether E&B/Contractors were aware of how hazardous mercury is and if it was considered in their risk assessment for working on the drainage system. ML to consult Terry Sweeney.
- ii. Comments from SLS staff on SS Waste Disposal Guidance were conveyed to Kirsten Paterson at the meeting on 7/4/04 (se 30th January 2004, item 9). Generally well received but the main bone of contention was neutralisation/inactivation of waste to avoid expensive, special disposal. This is something that is not routinely done in SLS and staff would need training to ensure they knew how to carry this out correctly, especially where there may be vigorous reactions or release of hazardous gas. LG and IB to consider. Kirsten Paterson will revise guidance and post on SS website. LG and IB agreed to draft waste disposal flowcharts in an attempt to clearly identify all waste disposal routes in SLS. Some procedures will require revising, e.g. blood and tissue, others just need documenting.
- iii. PTW scheme was also discussed at meeting on 7/4/04. LG presented the SLS version of the PTW for Potentially Hazardous Areas and asked if SLS could issue this to E&B/Contractors until such time as E&B fully adopt the SS PTW scheme. SLS version is very similar to SS version. Kirsten had no objection to it being used in SLS in the interim. Group agreed that all SLS should begin using this PTW for TC suites and radioactive areas. IB raised the issue of roof permits and how MSI/WTB staff are attempting to enforce the correct procedure. Group agreed that all SLS should abide by roof permit scheme and Building H&S Officers should deny access to roofs unless a valid permit is presented and adequate notice given. IB and LG to formally notified those concerned.

ML

LG/IB

IB/LG