

SLS H&S Working Group Meeting Minutes

Meeting held on Thursday 30th June 2005 at 2pm in WTB Meeting Room 111

Present

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

Apologies

Items **not** requiring action are in grey text.
Priorities are in **red text**.

1. Previous Minutes

- Accepted as a true and accurate account.

Matters Arising:

- **31st October 2003**

8. AOCB

- viii. **IB and LG have spoken with Sue Black re Mortuary H&S material and she is happy to review the dissection RA and COP. LG to send ASAP. Sue asked if an unannounced inspection could be carried out some time soon. IB/LG to arrange with Safety Services.**

- **24th August 2004**

6. AOCB

- x. IB gave RA and SOP to EM and NMR staff accessing 1st floor roof and collected the required signatures. LG to keep master copy.
- 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 still in the process of doing SOPs and RAs for Media and Wash-Up areas. IB and LG still to meet to discuss procedure for spillage of TC/micro-org waste.

- **5th November 2004**

2. Gas Cylinder/Regulator Action Plan

- ii. ML still to update Carnelley building fire plans minus items that will be removed when chemists move to CIR.

- **28th January 2005**

10. AOCB

- ii. IB still to arrange a manual handling course. Will hold one after the trainers' refresher course in June.

- **25th February 2005**

AOCB

- vi. LG still to investigate the implications of Personal Emergency Evacuation Plans (PEEPs) in SLS. ML expects there to be one or more wheelchair bound students in LSTU next year. Also one summer placement in SLS IT Office.

- **25th March 2005**

2. Update on H&S Management Committee Tasks

- iii. Risk Assessment System Tasks:
 - a. LG still to see Ian Scragg about MO and B&T assessments.
- iv. H&S Training Tasks:
 - a. LG got confirmation on Official DSE User issue from Kirsten Paterson. LG to go through user definition forms and compile list of Official Users. Official Users to be notified of their entitlement to free eye-tests etc.
 - g. LG still to investigate Radman course options and discuss with IRL. AW asked for Allison Bridges to be added to the list of prospective attendees. GA said that the requests for training arising from the staff reviews included several requests for

Action

LG

IB/LG

IB

IB/LG

ML

IB

LG

LG

LG

LG

RPS training. GA has given LG details.	
i. LG to pursue re-starting the in-house RPS training program with Martin Rollo.	LG
4. Monthly Review of Accident/Incident Reports	
iv. LG to amend Accident/Incident Reporting policy to include info on investigation forms.	LG
5. AOCB	
i. IB contacted Heather Adams to arrange for a hypoallergenic soap dispenser to be installed in the Carnelley toilets. ML to check if these are in place.	ML
• 28th April 2005	
4. Execution of BTC Implementation Plan	
LG gave staff database list to IB. IB to do first compliance check ASAP.	IB
• 25th May 2005	
2. PAT in LSTU	
See item 6 of today's agenda.	
3. Risk Assessment Training Progress	
See item 5 of today's agenda.	
4. Amended Lone & Out-of-Hours Working Documentation	
i. LG has only received comments from GA so far. IB to forward comments by end of July to allow LG to finalise documentation.	IB
ii. Once finalised, LG to discuss with IRL and check that material does not have to be resubmitted to the H&SMC prior to policy being implemented.	LG
iii. Once the above is resolved, LG to post material on web and inform all personnel.	LG
5. Feedback on Safety Services' Stress Risk Assessment Training (GA)	
See item 4 of today's agenda.	
6. Approval of Risk Assessments and SOPs issued at previous meeting	
UV, Agarose Gel Electrophoresis and general Electrophoresis RAs and SOPs have been approved.	
8. Progress on Outstanding Inspection Tasks	
See item 8 of today's agenda.	
9. Monthly Review of Accident/Incident Reports	
LG received comments from the Lab Managers. Comments to be factored in then finalised SOP to be issued.	LG
11. AOCB	
i. ML confirmed her acceptance of New H&S Roles and Responsibilities document.	
ii. ML reminded her staff that labcoats must not be worn outwith SLS buildings. Staff acknowledged that message was received and understood.	
iii. GA, ML and IB gave permission for their photographs to be used on the H&S web site. ML to ask Marilyn Hardie for her permission. LG to ask Nick Helps. IB to provide LG with an updated list of Fire Wardens/Marshals and First Aiders.	ML/LG IB
2. Portfolio Update	
LG issued copies of the June 2005 version of the H&S Portfolio and talked through the updates. Group were happy with changes. LG pointed out that the Policy section will remain unchanged until IRL and CPD approve the New H&S Roles and Responsibilities document.	
3. Roof Access	
i. LG gave an account of the meeting with Gordon Smith and Terry Sweeney re roof access during formaldehyde fumigations.	
ii. In light of the computer modelling data produced for the CIR project, it was decided that access be denied to the exposed roof top areas of all three buildings – CIR, WTB & MSI – during formaldehyde fumigation start-up and purge times. This will apply to all large scale, deliberate releases until further notice.	
iii. An email summarising the outcomes of this meeting was copied to Kirsten Paterson, Ian Scragg, IRL, IB, Terry Sweeney and George Morrison.	
iv. Gordon Smith and LG both agreed that a further "roof access" meeting was required to discuss issues such as emergency access outwith normal working hours. IB agreed. LG to arrange.	LG
4. Stress Risk Assessment in SLS	
i. At the training seminar on 8/6/05, Kirsten Paterson said that, at the present time, Stress RA should take priority over other H&S issues.	

<ul style="list-style-type: none"> ii. CPD attended this seminar and, afterwards, asked that the H&SWG take this forward and begin the process of producing generic Stress RAs for each personnel group. iii. The Group did not envisage the Stress RA process actually reducing levels of stress or being of any benefit to the people who are genuinely suffering, but agreed that the paperwork has to be in place. 	All
<ul style="list-style-type: none"> iv. LG suggested that the process should begin with identifying the personnel groups and deciding who takes the lead on each group's RA. Group agreed to deal with this at next meeting. 	
<ul style="list-style-type: none"> v. ML reported that individual stress RAs have been done for all technical staff in LSTU. vi. LG and IB had previously discussed the possibility of running courses in relaxation methods. GA and ML though this was a good idea. IB to contact John Shaw to find out if he is willing to deliver such training. 	IB
<ul style="list-style-type: none"> vii. GA thought the new H&S Committee meetings would provide a good means of getting the workers perspective on the stress issue. Group agreed that this should be tabled on the agenda for the first meeting. 	GA
<ul style="list-style-type: none"> viii. GA suggested meeting with Gillian Jones to further discuss Stress RA and related initiatives. Group thought this would be beneficial. GA to arrange. 	GA
5. LSTU Risk Assessment Progress	
<ul style="list-style-type: none"> i. ML has checked RAs 59 to 63; IB has checked 64 to 68; LG has checked 43 to 59. 	
<ul style="list-style-type: none"> ii. ML to verify that 48, 49 & 53 are acceptable and LG to briefly double check others before entering approval details. 	LG
<ul style="list-style-type: none"> iii. IB, ML and GA have been assigned another batch of assessments to check before the next meeting. LG to continue from number 88. 	All
<ul style="list-style-type: none"> iv. It was agreed that approvers can amend assessments as necessary unless input from the original assessor or other members of the H&SWG is required. 	
<ul style="list-style-type: none"> v. Pete Rowel is checking with Hilary Kay Young on the reasons for using the HG2 pathogen staphylococcus aureus, rather than a non-pathogenic alternative, in the Control of Microbial Growth practical (BI22012). GA said there was a good reason but could not remember the details. LG said if its use was justified there was no problem, as long as Containment level 2 procedures are adhered to. 	ML
<ul style="list-style-type: none"> vi. LG has shown Mike Hannan how to access the Manual Handling Risk Assessment database and provided a worked example. Mike has agreed to begin risk assessing manual handling operations carried out in Stores. 	
6. PAT Latest	
<ul style="list-style-type: none"> i. Two PAT meetings have been held with Ian Scragg and Bill Reynolds with a view to ensuring all LSTU equipment due for PAT is done before the start of the 2005/2006 academic year. 	
<ul style="list-style-type: none"> ii. It has been confirmed with Bill Reynolds that only BSI and MSI equipment needs to be done at this time. OTI will be included if time permits. 	
<ul style="list-style-type: none"> iii. Not all faulty equipment will be repaired in full or replaced immediately but a program will be drawn up to cover all outstanding issues. 	
<ul style="list-style-type: none"> iv. It was stressed to LSTU and Safety Services staff that the top priority is to ensure that the practical classes run on time. 	
<ul style="list-style-type: none"> v. Monthly meetings will be held in order to analyse summaries submitted by Bill Reynolds and draft programs of repair/replacement. 	
<ul style="list-style-type: none"> vi. If all School equipment is to be PAT tested on a two year cycle, an external contractor will be required to assist Bill Reynolds. IRL has agreed to this in principal. Discussions on this topic will resume once the LSTU summer program is completed. 	
7. Progress on H&S Management Committee Tasks	
Deferred until next meeting.	
8. Progress on Outstanding Inspection Tasks	
<ul style="list-style-type: none"> i. LN2 Inspection Tasks: <ul style="list-style-type: none"> a. All O2 depletion monitors will be recalibrated and tested on-site sometime in June. Exact date TBA. 	LG
<ul style="list-style-type: none"> b. Ian Scragg deemed installation of a CO2 monitor in the external CO2 store to be unnecessary on the basis that the relevant BCGA guidance applies to internal stores only. LG notified BOC of this decision and copied the letter to Terry Sweeney, IRL, IB and Donald Gardiner. 	

<ul style="list-style-type: none"> c. IB and LG have started compiling footage for LN2 training video. Training material to be completed and training to be delivered as part of the H&S Induction Day planned for October. 	<p>IB/LG</p>
<ul style="list-style-type: none"> d. Work on other outstanding tasks is in progress. EM and X-ray facility still to do. ii. Gas Cylinder/Regulator Inspection: Group decided this should be deferred until LN2 tasks and TC Inspection follow up are completed. 	<p>LG</p>
<p>9. Monthly Review of Incident Accident Reports</p>	
<ul style="list-style-type: none"> i. A member of research staff received a needlestick injury from a needle contaminated with ethidium bromide and caesium chloride. The nature of the procedure being undertaken at the time makes this type of injury quite likely. Staff should be reminded to exercise extreme caution. LG to add this to the "Lessons to be Learned" page on H&S web. 	<p>LG</p>
<ul style="list-style-type: none"> ii. A member of research staff received a very minor liquid nitrogen burn to their hand. iii. A member of staff on WTB3 was found to be working at a safety cabinet with the UV light on. No injury sustained but serious UV burns to skin and eyes could have resulted. LG to check details with Letty Gibson. Fortunately, only one cabinet in SLS has a UV light fitted. Staff are advised against fitting UV lights in safety cabinets. 	<p>LG</p>
<ul style="list-style-type: none"> iv. A window in a WTB2 TC suite cracked as a result of the building work in CIR. Glass did not fall out of the frame and no injuries were sustained, however, staff working in the suite at the time did get a scare. Referred onto E&B for investigation & repair. 	
<ul style="list-style-type: none"> v. An ambulance was called for a member staff suffering from crippling abdominal pain. Not work related and individual made full recovery. 	
<ul style="list-style-type: none"> vi. A liquid nitrogen spill occurred in the WTB basement corridor when a dewar toppled over while being transported by one of the Porters. No injury or damage occurred. The Porter was attempting to move two dewars at once, pushing one and pulling the other. This method is not recommended. It was also noted that the Porter was wearing latex gloves, that afford no protection, rather than heavy-duty leather gloves. This incident will be cast up at the Porters' refresher training in September. 	<p>IB/LG</p>
<p>10. Next month's Big Issue</p>	
<p>Continue with lone and out-of-hours working until material is on web and policy comes into effect.</p>	
<p>11. AOCB</p>	
<ul style="list-style-type: none"> i. Dangerous Goods refresher course took place on 30/6 and 1/7. LG thought that it was important for all staff to know who the contact is and what information/services they can provide. Group agreed. LG to ask Linda Connelly if this information could be made available on the H&S web. 	<p>LG</p>
<ul style="list-style-type: none"> ii. ML raised the issue of a member of staff wishing to take an unwanted barometer home. The instrument contains a significant amount of mercury so ML decided to ask Kirsten Paterson for advice. ML to forward Kirsten's response to the other Group members and get their comments before deciding how to proceed. 	<p>ML</p>
<ul style="list-style-type: none"> iii. ML also raised the issue of LSTU technicians carrying out soldering work in OTI. Once again, Kirsten Paterson had provided advice on this. ML to forward Kirsten's email to other group members and get comments before deciding how to proceed. 	<p>ML</p>
<ul style="list-style-type: none"> iv. ML agreed to keep Carnelley O2 depletion monitor logs until Chemists move out and monitors are required elsewhere. 	