

University of Dundee

RADIATION SAFETY SUB-COMMITTEE

A meeting of the Radiation Safety Sub-Committee was held at 3.30pm on 17th January 2012 in the Seminar Room, JBC 2.

Present: Prof Mike Stark (MJRS) [Chair]
Ms Lisa Grayson (LG) [Minutes]
Mr Damian Leddy (DL) [University Radiation Protection Adviser]
Mr Martin Rollo (MR) [University Radiation Protection Officer]
Ms Letty Gibson (LMG)
Ms Shellagh Neil (SN)
Ms Karan Bollan (KB)
Dr Nick Helps (NRH)
Ms Allison Bridges (AB)
Mrs Aileen McLaren (AM)
Dr C Connolly (CC)

Apologies were received from Sheila Sharp (SS), Dr David Sutton (DS)

MINUTES

ACTION

1). Composition of the Committee - Welcome CC to the committee

CC was welcomed to the Committee as a Med School Pi.

2. New Items for the Agenda.

Annual Review of SEPA inspections at the Main Campus and the Medical School.

NH

NH stated that he thought the MRC SEPA report should be included in the review. This was agreed.

Action Point: NH will supply the MRC SEPA report to the committee at the next meeting.

Main Campus

MJRS thought that all the issues in the CLS report had been addressed satisfactorily. MR went on to clarify the Uranium and Thorium disposal issue. This waste look like its disposal as an addition to "normal rubbish," was now prohibited. The waste will know incur some financial cost to the University as a Waste Company will have to be contracted in to remove this waste.

Medical School.

MJRS asked if the outstanding issue of reviewing stock levels has been resolved. SN said it had. SN stated that the request by SEPA to review the Medical School Certificates is on hold until the Medical School has been restructured. This timescale is within the time allocated by SEPA for the review of the Certificates to occur. MR asked about the frequency of use of the Irradiator. SN stated that its use was occasional at the moment and use was characterized by block bookings then periods of inactivity. AM said that her Unit may have a project in the near future which would require use of

the Irradiator. MR asked if the Main Campus could use the facility. LS and LMG thought this could prove impracticable, but Pi's on the Campus should be made aware of the Ninewells facility as a back up to the Irradiator we have in Life Sciences. MR mentioned the huge cost in declaring the Irradiator as sealed source waste, which would incurring a huge disposal cost.

DL asked if the issue of amending radiation use forms had been dealt with. SN said it had and only minor changes were required and the matter had been dealt with. SN stated uniform forms for all Medical School Departments are not possible due to the variety of work going on.

3). The minutes of the meeting held in December 2011

The minutes were approved.

4). Previous Meeting Action Points (PMAP)

a) The Radon Survey has been completed and the results collated. Analyses of the results show that all 11 reading were very low and well below (approximately 4 times below) the Action Level for Radon Gas in work area. 10 sites on Campus, and 1 at the Medical School were surveyed.

No further action is therefore required.

b) MR reported that the Waste Tender process will continue for another month, at which point he will be able to choose from the selected Companies a suitable Tender Offer that offers the best contractual arrangements and will be most beneficial to the University.

MR

Action Point: MR will update the committee at the next meeting.

c) DL and LG informed the committee that the creation of the Generic Risk Assessment Database is nearly finished. There are a couple of dose calculations for specific circumstance to be added but the database should be completed by the next committee meeting.

DL and LG

Action Point: DL and LG to complete database by next committee meeting

d) LMG reported that after her meeting at the James Hutton Institute (JHI) with Dr John Jones (the RPO) it was concluded that the RIMS system should not be adopted at the JHI due to the potential for confusion in shared labs.

e) On-line testing of new users.

DL

DL outlined the design of the system and how the tests would be implemented. All agreed that a system of testing New Users would be a great advantage to the current training syllabus. Examples of possible questions were demonstrated, including how the User would be scored and the consequences of a person failing the test. DL explained that the questions are randomly chosen from a pool and that the structure is designed to cover a wide range of radiation safety topics. Further questions can be added by committee members and question topics varied to cover all typical User scenarios. It is hoped the system can be made available to the Medical School as well as the City Campus. A demonstration should be available for the next Radiation Safety Meeting. Further discussion ensued on when to run the tests, either before or after the New users Course. DL thought that it would be preferential for users to take the test before attending the new user's course. NRH mentioned that the test could be used to verify a users experience and then used to confirm that they do not need any further training from Safety Services.

Action Point: DL will demonstrate the system at the next Radiation Safety Meeting.

f) User Interview.

MR stated that this is working well and approximately 20 interviews have been completed and the process will continue to run throughout the year. No major discrepancies have been found in user's records to date. The next series of interviews will focus on H-3 users and wipe test records. MJRS asked if MR thought this was a beneficial exercise. MR said yes he thought so.

g) Scottish Aurpo Meetings.

The Scottish AURPO has not met since the last Radiation Safety Meeting. However a meeting is now due, the date of which will be set by St Andrews University.

Action Point: MR and DL will update the committee regarding any future Scottish AURPO meetings.

MR and DL

h) SEPA Inspection Ninewells .

Most of the points were covered in agenda item 2 by SN. The issue of LLW clinical has been dealt with to SEPA's satisfaction with the information regarding waste going directly to Med Physics.

4. New Agenda Items

a) The future of the MRC Unit

NH informed the committee that the MRC Unit's current funding runs out on 31st March 2012 and Prof. Dario Alessi has been appointed as the new Director of the Unit from this date. The MRC will continue funding the Unit until 31st March 2013 at which time the Unit will change, although it is unclear at this point what these changes will be. The most likely outcome based on other Units who have gone through this will be that the Unit will cease to be an independent Unit and will be amalgamated into the University of Dundee and become an "MRC University Unit" with all MRC staff becoming University of Dundee staff and all funding and infrastructure being done through the University including all regulatory certificates such as SEPA Authorisation and Registration. MR commented that in September 2012 the MRC will need to advise the University of their intended isotope usage and in particular their P-33 usage as the University of Dundee SEPA Authorisation and Registration certificates might need to be altered to accommodate the "MRC University Unit".

Action Point: NH will update the committee at the next meeting regarding the future of the MRC Unit.

NH

b) Update on City Campus Qualified Expert appointment under RSA93

DL informed the committee he has been appointed the Radioactive Waste Adviser for the City Campus, MRC Unit and consultancies.

c) New EPD demonstration

DL demonstrated the new Tracerco Personal Electronic Dosimeter that was recently purchased by Safety Services. He highlighted that the dosimeter will be available for any user of radiation within the University to borrow including Ninewells Medical School. DL will email RPSs to let them know the PED is available. The badge will be issued by Safety Services and is expected to be lent mainly to users of high activity sources or to reassure users who have concerns about the dose they might be receiving. DL also showed a graph the dosimeter had produced after being worn during a recent cell labeling experiment and explained how the results are helpful in

DL

identifying where and when large doses may have been received. However AB did mention that during the experiment the alarm on the unit was set too low and caused the user to think there was a risk where there was not. DL said he was aware of this and the alarm will be set correctly for the next time the badge will be used which should be in the next week. MJRS asked DL if he thought the University would benefit from having more than one of the dosimeters but DL felt that due to the cost and only occasional usage of the current dosimeter, one would be sufficient at the moment and the committee agreed.

Action Point: DL will email RPSs to let them know the PED is available.

d) Medical School Update Report (paper)

SN presented the Medical School update report and it was accepted by the committee.

e) Update on the re-organisation of the Medical School

SN informed the committee that there has not been any progress with the restructuring of the Medical School since the last meeting. MR asked if any groups had moved into the Jackie Wood Building and SN confirmed that no one is working in that area until building work is completed. MR asked if the Jackie Wood Building will require new Certificates and SN said SEPA were aware of the situation and had advised that new Certificates would not be necessary because the existing SEPA certification is general enough to cover the Jackie Wood Building even though it is a separate building. SN informed the Committee that SEPA will inspect the Jackie Wood Building before staff move in.

Action Point: SN will update the committee at the next meeting regarding what stage the restructuring of the Medical School has reached, whether the Medical School SEPA certificates have been reviewed and the outcome of the SEPA inspection of the Jackie Wood Building.

f) Update on Medical School Qualified Expert appointment under RSA93

SN informed the committee she has been appointed the Radioactive Waste Adviser for Ninewells Medical School.

g) I-125 Spill classes 2012

MR informed the committee DL and himself have run 3 spill simulation classes in 2011 which were popular and they intend to run at least another one, or possibly two in the next few months. Once the I-125 classes are completed they intend to run a class to simulate a situation where a P-32 spill has occurred but the user is also injured. MR invited Ninewells Medical School staff to attend and AM acknowledged that they have received MR's emails but there is very little I-125 working carried out in Ninewells Medical School at the moment.

h) Additional RPS Assurance Monitoring to include limited record keeping checks on contamination monitoring.

MR outlined Safety Services proposed alternative system of RPS Assurance Monitoring. RPS's would be required to check User Contamination Monitoring Records in Low Level Areas as well as the physical monitoring they do at the moment. The Monthly assurance monitoring should be split evenly between these tasks 50/50 so as not to over burden the RPS's with extra work. The committee agreed this would be of benefit and would ensure records are up-to-date for SEPA inspections etc. NH pointed out they have a slightly different system in the MRC Unit where NH Audits the users periodically. Medical Physics do not do RPS Monthly Assurance Monitoring, instead they do yearly auditing.

SN

MR

Action Point: MR will email all RPSs to inform them of the updated system.

i) Waste Disposal costs 2011

MR informed the committee the waste costs for the City Campus in 2011 were £6700 (which consisted of the year's Low Level solid waste, two sealed sources and approximately 70 scintillation drums). SN was unable to say what the waste costs were for Ninewells Medical School in 2011.

Date of next meeting

It was proposed the next meeting will be late June 2012 at 3.30pm. The committee will be emailed by the end of January to arrange the exact date.