

University of Dundee

RADIATION SAFETY SUB-COMMITTEE

A meeting of the Radiation Safety Sub-Committee was held at 2pm on 14th May 2009 in the Brian Cox Meeting Room, Mezzanine Floor, JBC.

Present: Mr Grant Reekie (GR) [University Radiation Protection Adviser]
Ms Lisa Grayson (LG) [Minutes]
Mr Martin Rollo (MR)
Mr Damian Leddy (DL)
Ms Letty Gibson (LMG)
Dr Sheila Sharp (SS)
Ms Aileen McLaren (AM)
Ms Karen Bollan (KB)
Dr Nick Helps (NRH)
Ms Allison Bridges (AB)

Apologies were received from Prof Julie Frearson (JF) and Dr David Sutton (DS).

MINUTES

Action

1. Minutes of the meeting on 3rd Dec 2008/Matters Arising

The Minutes were approved.

Matters Arising:

All matters arising were covered under the 14/05/09 agenda.

2. Composition of the Committee

a) New Committee Roles

KB, Deputy RPS for the Division of Medical Sciences, was introduced as a new member of the Committee and welcomed to the meeting. DL explained that JF would now be the Committee Chair and DL and MR would be the Committee Conveners. In the absence of JF, DL chaired today's meeting.

3. New Items for the Agenda

See Item 8.

4. Main Campus

a) RPA Access to Life Sciences Databases and Web Site

LG still to submit a request to Life Sciences Computing. LG to give Medical School Committee Members access also.

LG

b) Review of the RADNUC form

DL explained that the RADNUC and RADPER forms will be used primarily for registration of projects and users respectively. Risk assessments will be done separately and stored in the Life Sciences Risk Assessment Database System. A set of generic assessments will cover most of the work but special assessments will be required for certain experiments. NRH added that the Health Protection Agency Inspector who visited the MRC unit last year commented on the need for suitable and sufficient risk assessments.

DL/MR
/LG

c) Storage of Lab Coats Within Hot Rooms

A new Hot Room monitoring log has been introduced, in light of the lab coat contamination incident, which includes columns for monitoring self before and after work. AB reported that compliance with monitoring requirements has improved of late. AM commented that the Medical School have a similar monitoring log. MR offered to supply copies of Main Campus logs if required. LG said she would arrange for the

Medical School representatives to have access to the forms via the CLS H&S web site.

LG

d) Dosimetry Badges

A recent review suggests that several individuals who have badges do not strictly require them. SS explained that at the medical school the requirement for badges is determined by the RPS upon analysis of the RADPER. DL explained that the same system operates on the City Campus but that some PIs insist on their group members being issued with badges even when there is no need for them. SS suggested contacting these PIs to explain why badges are/are not necessary. MR said he had tried this approach with one PI but to no avail. LMG asked why this was an issue if the PI was paying the full cost of the badge. MR explained that several staff spend time processing the badges so there is more to it than purely the cost of the badges. LG commented that insisting on badges when they are of no benefit could suggest a lack of understanding of the risks associated with the work. DL hoped that the new risk assessments will help people understand when and why badges are required/not required. Committee agreed that this issue should remain under review.

e) Best Practical Means (BPM)

MR summarised the essential principals of BPM and explained why the declaration form was necessary. Committee members agreed that the form should be issued to PIs/Group Leaders. DL/MR to issue via the RPSs as soon as possible.

DL/MR

f) Audits

MR and DL both agreed that the standards observed during the recent audits were very high and that they would have no concerns if SEPA were to inspect soon. SS asked if full audits would be carried out every year. MR said the plan was to focus on a specific topic each year with this year's being low level areas and end users.

g) UV Audit 2009

MR informed the Committee that he plans to focus on UV safety over the summer months. SS asked if a laser safety audit would be carried out at some point. DL explained that laser is reviewed whenever a new system is proposed or an existing set up altered, but a full audit could be arranged in the near future.

MRC Unit

a) MR highlighted the potential increase in 33P usage in DSTT. AB explained that this is still just a proposal at present.

5. Medical School

a) Centre for Clinical Research

See item 8 of the Medical School Update April 2009.

b) Julie Smyth's Replacement

Still to be recruited.

c) Audit Reports

See item 5 of the Medical School Update April 2009.

d) Restructuring

See item 1 of the Medical School Update April 2009. SS commented that there are now very few core funded support staff available to take on Divisional H&S roles but with no plans to expand the core support team the existing members just have to cope.

6. RPS Matters

a) Online Forum

DL explained that the original plan to create a University wide RPS forum was abandoned due to lack of interest. An online forum has been set up in My Dundee as an alternative and went live on 14/5/09. DL asked the Committee members to visit the site, try it out and give feedback. DL to notify all RPSs by email.

All
DL

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| <p>b) <u>Spill Training</u>
 DL announced that Safety Services are purchasing a D-SIM radiation monitor simulation system, as used by the HPA, for spill training purposes. Previous attempts at radioactive spill mock-ups suggested that this was necessary to make the exercise more credible and improve the quality of the training. The system comes with suggestions for training scenarios. DL and MR will update the current training package as soon as the equipment arrives and arrange training sessions for all RPSs. The system is built to order and the estimated delivery time is 16 weeks.</p> | DL/MR |
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| <p>7. <u>Waste Disposal</u></p> <p>a) <u>3H Disposal Costs</u>
 MR drew attention to how much less the Medical School was charged for 3H waste disposal compared to the City Campus. SS explained that the Medical School benefits from the national NHS agreement. The Committee agreed that the possibility of the City Campus tapping into this agreement should be investigated. MR confirmed that Safety Services are exploring the available options. SS said she would consult DS but suspects that the recent low charges may have been due to an error on the waste contractor's part.</p> | SS |
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| <p>8. <u>Additional Agenda Items</u></p> <p>a) <u>Copy RiMS for Medical School</u>
 SS asked if a copy of the RiMS file could be sent to DS for him to assess whether it may be of use within the Medical School. LG to send a template file and the user guide.</p> <p>b) <u>Research Staff Representation on the Committee</u>
 MR/DL asked if there was any possibility of a PI from the Medical School and a PI from Life Sciences joining the Committee. SS said she had tried to recruit previously but with no luck. LG suggested attempting to recruit Post Docs who frequently work with radioactivity. MR and DL agreed that this would be an acceptable alternative. SS and LG to approach their respective Post Doc Associations for likely candidates and report back at the next meeting.</p> | LG

SS/LG |
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| <p>9. <u>Date of Next Meeting</u>
 Approximately 6 months hence. Exact date to be decided by JF.</p> | JF |