HSE

Health and Safety Executive

Hazardous Installations Directorate

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Head of Unit:
Dr Joanne Nettleton

Dr Ian Scragg
Biological Safety Officer
Safety Office
University of Dundee
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Date 25 November 20088

Reference BAU 6

Dear Dr Scragg,

HEALTH & SAFETY AT WORK ETC. ACT 1974 ;THE CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH REGULATIONS 2000, AS AMENDED AND THE GENETICALLY MODIFIED ORGANISMS(CONTAINED USE) REGULATIONS, AS AMENDED (2005)

I am writing in response to my visit to the University of Dundee on 18th November 2008. Overall, I was left with a positive impression of health & safety standards as seen and described at the time of visit and I was generally encouraged by the approaches taken.

There are some important issues that we discussed on the day that should be taken forward to your Safety Committee for discussion and action, if needed. I would be grateful if you would bring these issues to the attention of your Senior Management.

Notification of GM6/96.1, as amended by GM6/05.2

This Notification was submitted for work with parasitic protozoa (including *Trypanosoma brucei rhodesiense* and *Leishmania donavani*) as a Class 3 activity. This activity requires a Consent from HSE. I inspected Professor Fairlamb's laboratory suite, where this work is taking place and this suite of laboratories is currently operating under derogated Class 3 controls: the lab is not sealable for fumigation, extract HEPA filter are in place but have not been checked and the laboratory is held a very slight negative pressure.

Your current Consent for this work only allows for a single derogated control measure: Table 1c (new measure 9) – infected animals held in isolators. This means that you currently should be working with full Class 3 controls (with the sole exception of animal isolators) for this work.

We discussed in detail the location of the HEPA filters in the CL3 suite and my understanding is that these filters are so poorly sited that proper examination and testing is not possible. This means that the lab is unlikely to meet the requirements of full CL3.

After some discussions and looking at the actual risks from the work taking place I am content that there is no adverse risk to workers or the environment from the activities observed in this lab. However, you are in technical breach of the Regulations and this must be addressed as a priority. You should make a retrospective Notification – or apply to HSE for a revised Consent for this activity. Your application should list the required derogations and a copy of your risk assessment – which should include full justification for the derogations requested, should be included with your application. Further details on how to make this application can be found on our website.

Dr David Bighty's research Group – Ninewells Hospital – level 5

Dr Bighty's laboratory has a research interest in fully infectious HIV-I. I understand that this work does not involve any genetic manipulation and the laboratory operates at full CL3.

The laboratory is maintained to a good standard and there are good operating procedures and emergency contingency procedures. However, the following points should be addressed for this laboratory:

- Liquid waste discard – I understand that very small quantities of liquid waste are generated in the laboratory. This is currently treated with disinfectant and discarded down the drain. All waste from CL3 laboratories should be autoclave wherever possible. We discussed some alternative ways of doing this. You should re-assess your liquid waste treatment policy to ensure that any liquid waste leaving the laboratory is completely inactivated. In my opinion, autoclaving is the best way of achieving this – alternatively you should validate your disinfection protocols to ensure the same level of kill is achieved.

- Sharps policy – we discussed this at some length and the laboratory has a good sharps minimisation policy. However, some work is performed on glass microscope slide with fragile glass cover-slips. We discussed some alternatives to this and decided that these were unsuitable. I recommend that you fully assess this task to minimise breakage of the cover-slips. In my experience, cover-slips tend to break as they are removed from glass slides, etc. I would suggest that slides and cover-slips are placed into a suitable disinfectant for removal – otherwise consider direct disposal of the slide and its cover-slip.

- Fumigation – should there be a significant spillage outside the cabinet the laboratory would be fumigated with Formaldehyde vapour. However, there is no sample port for a formaldehyde probe/meter to ensure that that residual levels of Formaldehyde have been reduced to below the Workplace Exposure Limit of 2pp, before people re-enter the laboratory. This should be addressed as soon as possible.

- Formaldehyde vaporiser – the socket for the formalin vaporiser is poorly located at the back of the laboratory. This would mean that persons would have to pass over any spillage in order to plug-in the vaporiser for fumigation. This socket should be re-located close to the laboratory door so that fumigation can be effected without re-entry to the laboratory. The SOP for this procedure should be revised or updated once the socket has been moved and the sample port has been fitted.

- Viewing of lab occupants – COSHH requires that an observation window is present so that occupants can be seen from the corridor. The shape of this laboratory means that workers using the microscope cannot be seen from outside the laboratory. You should assess this and determine if there is a significant risk from the activities within the lab that would make it necessary that workers could be observed at all times. If this is so, then this can be addressed by a strategically placed in the tope left-hand corner of the laboratory. Otherwise you should ensure that occupants of the lab can quickly summon aid, if needed.

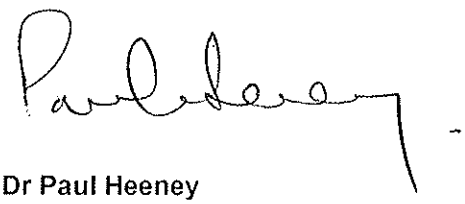
These issues should be addressed within 28 days of receipt of this letter. You should write to me at the address given at the top of this letter to confirm that these issues have been dealt with. If you require any additional time, please contact me at HSE to discuss.

Section 28(8) of the Health and Safety at Work *etc.*, Act 1974, requires me to bring relevant factual information on the above matters to the attention of employees. I would suggest that a good way of doing this would be for you to discuss the findings of my inspection at the next formal safety meeting and possibly post the minutes of that meeting on the employees' notice board as a means of disseminating this information.

If you require any clarification of the matters, please do not hesitate to contact me. If you are in any way unhappy with the recommendations, you should contact my line manager, Dr Paul McDermott at the address below within 14 days of receiving this letter.

I hope you found the inspection to be informative and constructive and I would like to thank you for the help and cooperation shown during my visit.

Yours sincerely



Dr Paul Heeney
HM Specialist Inspector
Biological Agents Unit

On behalf of HSE