

INTRODUCTION	
Date of Inspection:	26 th February 2004
Area Inspected:	CPD Tissue Culture (TC) Facilities, Floor 2, MSI
Facility Users:	CPD Group
Lab Manager:	Yvonne Lindsay
Name of Inspector(s):	SLS Health & Safety Working Group members: Lisa Grayson, Irene Blair, Gail Alexander, Monica Lacey.
Objective of Inspection:	To establish the current status of all TC facilities, in terms of compliance with the local rules - Procedures Governing Work Activities Involving Micro-Organisms Requiring Level 1 or Level 2 Containment – as issued prior to the GM Inspection of July 2002.
NOTE	
<p>1. The person(s) indicated in the “OBSERVATIONS...” column must implement the recommended remedial action by the date specified in the “ACTION” column.</p> <p>2. The H&S Working Group will produce generic risk assessments, official standard operating procedures, etc to aid in the implementation of corrective action. A standard training program will also be devised.</p>	
OBSERVATIONS & REMEDIAL ACTION	ACTION
<p>1. BSO</p> <p>☺ Nick Helps. Staff are aware of this.</p>	
<p>2. Hazard Group 2 / Containment Level 2</p> <p>☹ No – all activities are CL1. Yvonne to inform H&SWG immediately if status changes.</p>	As & when
<p>3. Signage</p> <p>☺ Biohazard and “No entry to cleaners” signs posted as required.</p>	
<p>4. Restricted Access</p> <p>☺ Only in so far as access to the Complex is restricted. Acceptable for CL1.</p>	
<p>5. Negative Pressure</p> <p>☺ Neutral verging on slightly positive to the corridor. Not a problem if fumigation is not required.</p>	
<p>6. Emergencies</p> <p>☺ Fire and First Aid provisions adequate.</p> <p>☺ Sink tap is used as eye wash.</p> <p>☺ Phone in lab bears emergency number sticker.</p> <p>☺ No gas or other burners are in use.</p> <p>☺ 25l stock of EtOH is kept in appropriate storage cabinet,</p> <p>☹ No flammable warnings on 70% EtOH bottles. H&SWG to supply.</p> <p>☹ No dedicated spill kit but virkon and blue roll available. Spill procedure posted in suite. H&SWG to review spill procedure and consider need for dedicated spill kit.</p>	<p>31/8/04</p> <p>30/9/04</p>

<p>7. General cleanliness/tidiness & hygiene</p> <ul style="list-style-type: none"> ☺ Clean & tidy. ☹ Above floor cleaners do not operate in CPD suite. Cleaning done by Yvonne. ☺ Sink in anteroom is used for hand washing. Normal taps. Clean & tidy. 	
<p>8. Work space/surfaces</p> <ul style="list-style-type: none"> ☺ Suite is small but space is adequate. ☺ Work surfaces in reasonable condition. 	
<p>9. Slip/trip/height hazards</p> <ul style="list-style-type: none"> ☺ Some items are stored at height in the anteroom. Kick-stool provided. ☹ Yvonne to ensure that least used items are stored at height and that they are safely stowed. ☺ No trailing cables. ☹ Drawer units are not ideally placed but nowhere to safely stow them. 	As of now
<p>10. Storage of chemicals/consumables</p> <ul style="list-style-type: none"> ☺ Acceptable. 	
<p>11. Local rules</p> <ul style="list-style-type: none"> ☺ On display in anteroom. 	
<p>12. PPE</p> <ul style="list-style-type: none"> ☹ Blue labcoats available, and in pristine condition. No one to observe. ☹ Disposable gloves available in all areas. No one to observe. ☹ These issues are universal and need to be addressed at H&S Management Committee level. H&SWG to raise at next meeting. 	30/9/04
<p>13. Disinfection</p> <ul style="list-style-type: none"> ☺ 70% EtOH and 1% Virkon both readily available. ☺ Preference for autoclaving appears to be generally understood. ☹ Did not discuss disinfection validation. Need to raise awareness amongst all TC workers. H&SWG to consider. 	31/8/04
<p>14. Waste Disposal</p> <ul style="list-style-type: none"> ☹ Sharps – sharpsafes in use but they are large containers with red lids. Yvonne to confirm that these containers are being autoclaved before final disposal. Glass and plastic pasteurs in use. H&SWG to issue reminder on benefits and availability of plastic pasteurs. ☺ Solid waste - bins in good condition, not overfilled and only trace liquid waste. ☺ Aspirators – good condition and filters in place. ☹ Other liquid waste – no evidence of. ☹ Pipettes – No large glass pipettes used. Plastic pipettes disposed of correctly but no absorbent granules in bins. IB to investigate. ☹ Blood/tissue waste - Not discussed. Local rules to be revised by H&SWG. ☹ Chemically toxic waste – Not discussed. Waste disposal route to be reviewed by H&SWG. ☺ Normal refuse – No evidence of hazardous waste in normal refuse. 	<p>ASAP</p> <p>30/9/04</p> <p>30/6/04</p> <p>In progress</p> <p>In progress</p>
<p>15. Radioactive work/waste</p> <ul style="list-style-type: none"> ☺ Tritium sometimes used in TC. ☺ Trefoil posted on relevant incubator. ☹ Yvonne to confirm that contamination monitoring is carried out, when required, and that a standard procedure is followed. 	31/8/04
<p>16. Equipment</p>	

<ul style="list-style-type: none"> ☺ Both MSCs bear current test report. ☺ Fumigation prior to servicing/repair not required. Yvonne to inform H&SWG immediately if status changes. ☺ Users perform visual checks and report defects to lab manager. ☺ Other equipment generally in good condition. ☹ PAT testing last done in 1997. H&SWG to inform Safety Services. ☹ Wash-Up staff clean incubators. TC users disinfect hoods with Virkon once a month. 	<p>As & when</p> <p>30/9/04</p>
<p>17. Training</p> <ul style="list-style-type: none"> ☹ Training given by senior member of lab staff but no written records kept. Training record deficit is universal. H&SWG to address. 	<p>30/9/04</p>
<p>18. Risk Assessment</p> <ul style="list-style-type: none"> ☹ There are no risk assessments for TC activities. Risk assessment deficit is universal. H&SWG to address. 	<p>30/9/04</p>
<p>19. Arrangements for visitors E&B and contractors</p> <ul style="list-style-type: none"> ☺ H&SWG formally announced introduction of PTW scheme for TC suites on 2/6/04. ☹ Safety clearance certificate is available but appears only to be used for MSCs. Yvonne to ensure Safety Clearance certificate is used for all equipment. ☺ Labcoats are available for visitors and E&B. ☺ Visitors are escorted. 	<p>As of now</p>
<p>20. Other Comments</p> <ul style="list-style-type: none"> ☺ Chairs in good condition. ☹ The CO2 cylinders supplying the incubators are kept in the anteroom. H&SWG to make sure these are included in any future regulator testing program. 	<p>As & when</p>
SIGNATURES & DATE OF NEXT INSPECTION	
<p>Signature of Inspector(s):</p>	
<p>Date of Next Inspection:</p>	