

| INTRODUCTION | |
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| Date of Inspection: | 26 th February 2004 |
| Area Inspected: | MSI Floor 4 Tissue Culture (TC) Facilities, Room 4.18 |
| Facility Users: | Kinasource, PMT & HH Groups, ARP |
| Lab Manager: | Lynn McKay & Brian Weryk |
| 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>☺ For PMT & HH Groups, BSO is David Williams. Brian to ensure relevant staff are aware of this. Axel Knebel takes care of Kinasource H&S issues. Lynn to confirm that ARP is still using ducted hood – his BSO is currently Simon Powis, but this may change soon.</p> | <p>31/8/04 31/8/04</p> |
| <p>2. Hazard Group 2 / Containment Level 2</p> <p>☺ ARP, PMT & HH are all registered for adenovirus work requiring CL2.</p> <p>☺ H&SWG to check with Axel on CL of his activities.</p> | <p>31/8/04</p> |
| <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. H&SWG to check with Safety Services as to whether this is acceptable.</p> | <p>31/8/04</p> |
| <p>5. Negative Pressure</p> <p>☺ Suite has mechanism for switching to negative pressure mode (by shutting down supply fan), but suite appears to be positive to the anteroom whether this is activated or not, i.e. it does not work. Fortunately, the anteroom is negative to the corridor. H&SWG to check with Safety Services as to whether this is acceptable.</p> <p>☺ Suite has negative pressure alarm. Doubt if this is tested. H&SWG to investigate.</p> | <p>31/8/04 30/9/04</p> |
| <p>6. Emergencies</p> <p>☺ Fire and First Aid provisions adequate.</p> <p>☺ Lynn/Brian to ensure there is an eye wash facility nearby.</p> <p>☺ Lynn/Brian to check that all phones in the vicinity bear the emergency number sticker.</p> | <p>ASAP 31/8/04</p> |

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| <ul style="list-style-type: none"> ☺ Lynn/Brian to confirm if gas or other burners are in use. ☺ No flammable warnings on 70% EtOH bottles. H&SWG to supply. ☺ 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>31/8/04 31/8/04 30/9/04</p> |
| <p>7. General cleanliness/tidiness & hygiene</p> <ul style="list-style-type: none"> ☺ Reasonably tidy. Could do with a clean, especially the anteroom. Lynn/Brian to arrange. ☺ Do above floor cleaners operate in these suites? If not, who does cleaning? Lynn/Brian to inform H&SWG. ☺ Only sink available is also for general use. This is not ideal, but no simple solution. | <p>31/8/04 31/8/04</p> |
| <p>8. Work space/surfaces</p> <ul style="list-style-type: none"> ☺ Shortage of space but no simple solution. ☺ Work surfaces in reasonable condition but rather cluttered. | |
| <p>9. Slip/trip/height hazards</p> <ul style="list-style-type: none"> ☺ No trailing cables, but bins in walkway could pose a trip hazard. However, due to lack of space, there is nowhere to safely stow bins. ☺ Several items stored at height. Lynn/Brian to ensure kick-stool is available. ☺ Lynn/Brian to ensure that least used items are stored at height and that they are safely stowed. | <p>As of now As of now</p> |
| <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"> ☺ Displayed. | |
| <p>12. PPE</p> <ul style="list-style-type: none"> ☺ Blue labcoats available and in good condition. Two people in room at time of inspection – one wearing labcoat and one not. ☺ Disposable gloves available. Two people in room at time of inspection – one wearing gloves and one not. ☺ These issues are universal and need to be addressed at H&S Management Committee level. H&SWG to raise at next meeting. | <p>30/9/04</p> |
| <p>13. Disinfection</p> <ul style="list-style-type: none"> ☺ 70% EtOH and 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. | <p>30/9/04</p> |
| <p>14. Waste Disposal</p> <ul style="list-style-type: none"> ☺ Sharps – none overfilled. Plastic and glass pasteurs being used. H&SWG to issue reminder on benefits and availability of plastic pasteurs. ☺ Solid waste – bins in good condition, not overfilled and no trace of liquid waste ☺ Aspirators – in good condition and filters in place for all but except the ducted hood Lynn/Brian to ensure filter is installed. ☺ Other liquid waste – no evidence of. ☺ Pipettes – bins in good condition and only trace liquid waste in bin. No absorbent granules in bins. IB to check. Glass pipettes – all OK. ☺ 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. | <p>30/9/04 31/8/04 30/6/04 In progress In progress</p> |

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| <ul style="list-style-type: none"> ☺ Normal refuse – no evidence of hazardous waste in normal refuse. ☺ Lidded biohazard bins for CL2 work – metal bin with waste in it that appears to have been there for some time. Lynn to see ARP and arrange for disposal of waste. | ASAP |
| 15. Radioactive work/waste <ul style="list-style-type: none"> ☺ No evidence of radioactive work in this suite. Lynn/Brian to inform H&SWG is status changes. | As & when |
| 16. Equipment <ul style="list-style-type: none"> ☺ Lynn/Brian to ensure this year’s test reports (once issued) are clearly displayed on all TC cabinets. ☺ Only ducted cabinet is fumigated prior to servicing. Other cabinets are used only for CL1 work. Lynn/Brian to inform H&SWG if status changes. ☺ Users perform visual checks and report defects to lab manager. ☺ Other equipment generally in good condition. ☺ Wash-Up staff clean incubators. Lab managers clean MSCs at servicing time. No SOPs at present. H&SWG to draft. ☺ PAT test stickers show retest dates in 2003. H&SWG to inform Safety Services. | 30/6/04 As & when 30/9/04 30/9/04 |
| 17. Training <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. | 30/9/04 |
| 18. Risk Assessment <ul style="list-style-type: none"> ☺ There are no risk assessments for TC activities. Risk assessment deficit is universal. H&SWG to address. | 30/9/04 |
| 19. Arrangements for visitors E&B and contractors <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. Lynn to ensure Safety Clearance certificate is used for all equipment. ☺ Labcoats are available for visitors and E&B. ☺ Visitors are escorted. | As of now |
| 20. Other Comments <ul style="list-style-type: none"> ☺ Chairs do not have wheels, just fixed “feet”. Not ideal, but due to EBL’s move to Singapore and PMT/HH’s relocation to CIR in the near future, no point in replacing. ☺ The CO2 cylinders supplying the incubators are kept in the west end stairwell. H&SWG to make sure these are included in any future regulator testing program. ☺ If unused whiteboard is no longer required it should be removed from the suite. Lynn/Brian to arrange. ☺ Are PMT/HH/CGP Groups currently carrying out adenovirus work? If yes, which hood is being used? Brian to inform H&SWG. ☺ H&SWG unsure of how responsibilities relating to this TC suite are divided between Lynn and Brian. Lynn/Brian to clarify and if unhappy with how the above actions have been assigned, H&SWG are happy to discuss and revise report if necessary. | As & when 31/8/04 31/8/04 ASAP |
| SIGNATURES & DATE OF NEXT INSPECTION | |
| Signature of Inspector(s): | |
| Date of Next Inspection: | |