

**Nuffield Department of Clinical Neurosciences  
Departmental Safety Advisory Committee Meeting  
to be held on Thursday 11<sup>th</sup> February, 2pm via Teams**

**AGENDA**

1. DSAC members at the meeting:

Apologies: Andrew Sharott

Present: Kevin Talbot (KT), Maen Bazo (MB), Katie Warnaby (KW), Leslie Jacobson (LJ), Judith Cossins (JuC), Flavie Torrecillos (FT), Graham Ross (GR), Hannah Brooks (HB), James Brown (JB), Jon Campbell (JoC), Scott Thomson (ST), Tiphaine Bouriez-Jones (TBJ), Mike Sanders (MS)

2. Minutes of the last meeting (KT)

Minutes of the previous were approved.

3. Actions from last DSAC meeting

	<b>Topic:</b>	<b>Action required:</b>	<b>By:</b>	<b>Completed?</b>
<b>1</b>	Biological Safety survey	to be finalised	TBJ	Completed and emailed to Safety Office
<b>2</b>	Security drills	Review of security documents	TBJ	Documents in reviewed, drills planned for Spring 2021 – the results of which will be used to finalised the documents.
<b>3</b>	Radiation SOP	delivery procedure to be updated	LJ	In process – to be discussed during the meeting under point 9.
<b>4</b>	Laser	Laser audit	KW/TBJ	In process – to be discussed during the meeting under point 10.
<b>5</b>	Face covering supply	Contact WIMM and Uni Stores to establish supply to WIMM NDCN staff	TBJ	Completed – stocks were deployed to WIMM staff

4. Incident and accident reports

- Incident reports

i. Update on past incidents:

- Issues with ceiling tiles failing repeatedly was investigated further and discovered that a recurrent condensation of air from ventilation unit was causing this problem, remedial work was carried out and no further issue has been witness since – though monitoring remains in place.
- Awareness of incident is communicated in a monthly topic in the NDCN newsletter, information is copied in to CVM DSO so that topics are communicated there also.

ii. Near miss – West Wing - CO2 gas release -

- Moisture in the connection between a gas cylinder and regulator cause caused an ice crystal to form building up the pressure locally – the pressure relief valve then let out the

CO2. Alarm sounded – occupants were evacuated - System was shut down immediately. Remedial work was carried out later on that day, procedure have been reviewed and a new step has been introduced to avoid this from reoccurring. (Regulators will be turned off during exchange of gas cylinder to avoid abrupt change of pressure which can cause a release from the emergency pressure valve.)

iii. Near miss – West Wing - falling object

- After contractors carried out repair work on fire door across the West Wing, a door closer became loose out of hours and fell shortly after this. There was no reported injury but some damage and also a security issue as this happened on Level 6 main entrance which is normally controlled by swipe access. All door closers have been checked and contractors have now been instructed to ensure more secure attachment of door closers. Facilities team continue to monitor door closers as work continues on fire doors across the West Wing.

iv. Burn – Wolfson building - hot water

- Water deflected from a shallow cup whilst using the Zip tap in the Wolfson building, first aid was applied, the person suffered superficial burn. Everyone was reminded of pressure of water coming from the Zip tap but also how hot it is.

v. Burn – Wolfson building – hot food

- Food with high water content was heated up and spilled on the person whilst eating which caused superficial burn. Awareness has been raised to the high power of the microwave in the kitchen and that time or power may need to be decreased, signage is also present. The microwave power is 1000W, which is not unusual for a domestic microwave, industrial microwave are used in University buildings (WTCHG), a review of appliance would be beneficial,

vi. Exposure – West Wing - Needle stick injury

- Cells were being mechanically lysed using a needle, a student suffered needle stick injury, first aid steps were followed up immediately and advice from occupational health was sought and found that cells has been lysed due to buffer used prior to the injury. The group has reviewed their process, now favouring the use of blunt needles and updated their risk assessment.

5. Biological Safety update – (TBJ)

- 3 new GO RA which are being reviewed currently, together with a couple of amendment for existing GMO RA.
- Groups moving from OMPI/ WIMM/ Level 5 to Biochem 2 notification of change GMO RA – Safety Office is aware and TBJ is liaising with University Biological Safety Officer as well as supervisor to ensure this is completed.

6. Fire Safety Update – Maen Bazo

- a. Update on fire panel – there has been issued with the fire signal reaching the hospital switchboard when carrying out the weekly tests, there seems to be some kind of a delay, MB has contacted Pyrotec to investigate the issue and ensure the signal reach switchboard and fire team promptly.
- b. Fire compartment FMRIB – Following the revision of the building fire strategy, the University Fire Officer, Steve Emery, identified several breaches in fire compartmentation. This was due to prior work where contractors passed wires from room to room. This remedial work is near completion.
- c. Fire damper Wolfson building – an inspection was organised by Estates and the company found access hatches required, once installed they found dampers were all functioning as expected
- d. Sprinkler system, this is a long standing snag from the Wolfson building – a booster pump was installed prior

to Christmas, which remedied to a recurring false alarm. All is now working as expected.

e. Fire Risk Assessment (FMRIB) has been completed and is ready to send to Fire Safety Officer and Safety Office

7. Manual Handling update – Maen Bazo

- Currently 2 x 350Kg dewars are being pushed and pulled through the hospital corridors in order to sustain the cryogenics facility on level 5 – though this procedure is done with two people and the dewars are on roller base, this is a very significant manual handling procedure. MB identified a battery powered device to assist in moving the dewars from the company “Master Movers” this could be rented or purchased. DSAC members were in support of obtaining a suitable device.

8. Security Update – TBJ

- Wolfson document in draft and are being reviewed by local stakeholders.
- FMRIB document to be started
- Drill scheduled for spring, this will allow to review procedures and finalise documents

9. Radiation Safety Update – Leslie Jacobson

- All SOPs have been updated for the delivery of radiation, NDCN is no longer dependant on WIMM for deliveries, all documents have been approved by Safety Office.
- There are no facilities to receipt delivery directly to Level 5 laboratories, as a trained user, LJ needs to collect from industrial block directly, as the industrial block will no longer deliver to separate area. Delivery is kept in locked safe attached to a wall.
- LJ receives information as regards to date of delivery and then he or trained radiation users are called once the delivery has occurred.
- The parcels are sealed and will never be opened until it gets to the laboratory, there is no risk of spillage, also quantity ordered a minute and only an experienced user will collect (LJ).
- EA inspection due in March, it is thought it will be virtual for area with small holdings such as NDCN, and likely to come to site for high activity only. 30<sup>th</sup> March is the proposed date, the Safety Office will liaise with SRPS and RPS – LJ will notify TBJ.

10. Laser safety update – Katie Warnaby

Equipment	Location	Contact person	Documentation
Departmental microscope LSM 710	Level 5 labs	Tiphaine Bouriez-Jones	LS1 and LS2 Completed
Spinning disk	Level 5 labs	David Gordon	Awaiting documentation
“Bennett” microscope LSM 700	Level 5 labs	Ning Zhu	LS1 and LS2 Completed
Zeiss PALM microbeam	Level 1 labs	Connor Scott	Awaiting documentation
Sony SH800S	Level 1 labs	Connor Scott	LS1 and SOP Completed
Zeiss LSM880	BNDU	Ben Micklem	LS1 and LS2 Completed

All recently identified asset that weren’t already registered are Class 1 by design and only engineers are able to override interlocks.

Class 4 pain laser was already registered in the past and has risk assessment in place.

11. Risk register

- New location for NDCN groups: Biochem2
  - Relocation risk assessment will be covered by Biochem Covid measures – move expected April/May 2021

- Biochemistry has a specific safety forum and good communication is taking place between Facilities and Safety teams of Biochemistry as well as the groups who will be moving owing the help of Eleanor Waite who is coordinating the move.
- Activity on site will need to be assessed, this will be submitted to NDCN DSAC at a later time
- Cryogenic Facility: WW Level 5
  - Note to DSAC member that Bouygues carried out an audit against the hospital guidelines and found that our set up for nitrogen and gas cylinder bank were not meeting their standards.
  - Ideally both would be on a ground floor, with direct access to open air.
  - Remedial work is underway - which is why CO2 monitor is now in place in gas cylinder store
  - Though location of panel is located in the area that would be hazardous should there be a release of gas.
  - Our risk assessment ensure safe storage, handling and usage of gas cylinder (attached files for DSAC members to peruse) – though highlighted the need for personal gas monitors (one located at either side of Level 5 entrances).
  - We identified risk that ventilation is insufficient by LN2 facility
  - Also there is currently no immediate stop to prevent LN2 to continue to dispense should an incident occur. Emergency system is being investigated with Service Company.

**Action:** Portable Oxygen and CO2 monitors to be purchased so that staff can assess alarm safely. GR highlighted that the location of the alarm panel is a design fault and though personal gas monitor are helpful, they are not to be relied on – it is key to relocate the alarm panel.

**Action from last meeting:** formation of a LN2 working group to be confirmed – who should be on the group? KT, ST and TBJ will meet to discuss this, key stakeholder should be involved, NDCN as well as CVM.

## 12. Review of Departmental policies/ Risk assessments:

- Change from BCP level 2 to 3 - RTOSW documents have been reviewed there was no changes to measures, though activity level were kept to a minimum – human studies were also put on hold unless it is part of critical care or Covid-related research.
- West Wing building RA has been reviewed to reflect OUH policy of having 4 people per lift.
- FMRIB cleaning regime between human participant review: currently core staff are cleaning all welfare facilities as well as frequently touched area, in the scanning rooms, all areas are cleaned thoroughly between participants as per OUH instructions. It was agreed that OUH scan will need to follow OUH procedure whilst University activities can follow local guidelines: quick wipe of highly touched areas with Clinell wipe – which can be done by each user as they finish their work.
- Investigating passive ventilation where higher occupation no window can open: it was assessed whether the activity could be relocated and highlighted that suitable flooring will be needed if blood taking is required. Opening of a door can be a source of ventilation. Further discussion will be required with Steve Pearson to assess adequate ventilation.
- Querying the use of FFP3 where activities are expected to last for a long period of time and where there is low ventilation level: Some researcher feel anxious about facing research participants and wish to have better PPE than a surgical face mask. FFP3 face protection is typically used in hospitals where aerosols are generated from Covid patients, OUH and PHE guidance regarding Level 1 PPE remains unchanged and surgical face masks remains the norm when facing patients/research participants. PPE is always the last line of defence and other mitigations should always be sought to minimise close contact such as ventilation, shorter duration of contact, maximum distance possible for the activity. It is up to the Department to decide whether they wish to implement a higher protection than required. KT felt it is important to recognize concerns from researchers and FFP3 should be available in those instances.

List of all current risk assessment can be found on the SharePoint site: <https://sharepoint.nexus.ox.ac.uk/sites/NDCN/staff-intranet/coronavirus/SitePages/Home.aspx>

13. New University Health and Safety policies and memos (TBJ/GR)

- New training has been communicated to all occupants (memo M1-21); Internal pages list all training available through the Safety Office
- S1/21 Fire Safety Management – note of new fire risk assessment template and that drill are to be run on a termly basis
- S2/21 Manual Handling – clarify the responsibility to identify MHO by supervisors and the need to have a suitable risk assessment in place. MB is MHO assessor is help is needed with those RA.
- S3/21 Health, Safety and Environmental Incident Reporting and Investigating – reflect the introduction of the online system to report

14. Any other business (KT)

- Gloves on door handle – could all supervisor emphasise the one glove policy in place in NDCN: people must use an ungloved hand to touch door handles, telephone or any surfaces outside of the laboratory. Support staff are frequently reminding people on site – but lack of knowledge of the person's name or their group means it can be difficult to follow up recurring non-compliance.
- Ordering of gloves – with stock of gloves becoming an issue, it is important to pay great attention to gloves standards. Communication was sent out to laboratories reflecting the Safety Office recent glove toolbox to highlight how to assess the suitability of gloves. Companies have been offering medical gloves which are not suitable as per Safety Office toolbox presentation.
- Statement of Health and Safety Organisation due for review – this is will be circulated once an initial revision is completed to ensure we reflect current staffing as well as the move of groups into Biochemistry building.

15. Date and venue of future meeting – Thursday 1st of July from 2pm-3pm