

NUFFIELD DEPARTMENT OF CLINICAL NEUROSCIENCES

STATEMENT OF HEALTH AND SAFETY ORGANISATION

The Nuffield Department of Clinical Neurosciences (NDCN) is located at multiple sites.

John Radcliffe Hospital site:

West Wing (WW) - Level 6, Level 5, Level 3, Level 1, Level LG2

FMRIB Building (Wellcome Centre for Integrative Neuroimaging)

Wolfson Building

OxStaR, Modular building accessed via Level 3, Main hospital

Kadoorie Centre – Level 3, Main hospital

Weatherall Institute of Molecular Medicine (WIMM)

New Biochemistry Building (NBB)

Pharmacology Building (Brain Network Dynamics Unit - BNDU)

Some staff are situated in areas with other University Departments (listed in italic above) and in some cases other employers e.g. Oxford University Hospitals NHS Trust (OUH). These institutions/units have their own Statements of Health and Safety Organisation and adhere to their own Health and Safety Policies.

As the Department is located on the John Radcliffe Hospital site, it also observes the Health and Safety Policies of the OUH.

As Head of the Nuffield Department of Clinical Neurosciences, I am responsible for ensuring compliance with University Health and Safety Policy. My responsibilities are set out in the Annexe and, in order to fulfil them, I have delegated authority to others, as set out in Section 1.

1. EXECUTIVE RESPONSIBILITY FOR SAFETY

The Head of the Nuffield Department (HoD) of Clinical Neurosciences is **Professor Kevin Talbot**.

I am responsible for all health and safety matters within the NDCN. However, every employee with a supervisory role has a duty to ensure the health and safety of staff, students, and other persons within their area of responsibility; and of anyone else (e.g. contractors and other visitors) who might be affected by their work activities. In particular, the duties listed in the Annexe are delegated to supervisors for areas under their control.

As it is my duty to ensure adherence to the University's Health and Safety Policy, I instruct every employee with a supervisory role and the Departmental Safety Officer and the Divisional Safety Officer to report to me any breach of the Policy.

All those with executive responsibility should notify me and the Departmental Safety Officer **Tiphaine Bouriez-Jones** and the Medical Science Division Safety Officer, **Graham Ross** of any planned, new, or newly identified significant hazards in their areas and also of the control measures needed to avert any risks identified.

Where supervisors or others in charge of areas or with specific duties may be absent for significant periods, adequate substitution must be made in writing to me and such employees and other persons as are affected. Deputising arrangements must be in accordance with University Policy.

The following employees have executive responsibility throughout the Department for ensuring compliance with the relevant part of University Safety Policy:

The Laboratory and Facilities Manager, **Tiphaine Bouriez-Jones** is responsible for making arrangements for visitors, including contractors, and for ensuring the necessary risk assessments are in place.

Overall executive authority for safety for NDCN staff, students and visitors working in building managed by other departments is held by **Kevin Talbot** and delegated to the NDCN Departmental Safety Officer **Tiphaine Bouriez-Jones** and the Deputy Laboratory and Facilities Manager, **Maen Bazo**.

Where NDCN staff, students or visitors are working in buildings managed by other departments, then local rules will apply. All practices relating to building safety will be conveyed by local core staff. NDCN DSO or its deputy will keep close communication with Building DSOs to regularly monitor and review activities as necessary.

I have appointed **Leslie Jacobson** as the senior radiation protection supervisor (SRPS) and he is directly responsible to me for the day to day coordination of radiation protection arrangements within the Department and supervision or work with ionising radiation, in accordance with the requirements of the Ionising Radiations Regulations 1999. The purpose of this supervision is to ensure compliance with the requirements of the Department's local rules for work with ionising radiation and the University's general radiation protection arrangements. The SRPS is also responsible for supervising the keeping and use of radioactive materials and the accumulation and disposal of radioactive waste, in accordance with the conditions of the University's permits under the Environmental Permitting (England and Wales) Regulations 2010. This is a supervisory role and the SRPS has my authority to direct others.

I have appointed additional radiation protection supervisors (RPSs) where appropriate, to provide direct supervision of work with ionising radiation carried out in the Department. The RPSs will report to the SRPS on radiation protection matters. **Leslie Jacobson** is RPS for WW, **Wei-Wei Lui** RPS for WIMM, Susan Maxwell will be RPS for WIMM in Wei-Wei Lui's absence.

2. **ADVISORY RESPONSIBILITY FOR SAFETY**

I have appointed those listed below to advise me on matters of health and safety within the Department. If any member of the Department does not take their advice, they should inform me. If they discover danger that requires immediate action, they are authorised to take the necessary action and inform me subsequently.

Departmental Safety Officer (DSO)

Tiphaine Bouriez-Jones is responsible for:

- Advising me on the measures needed to carry out the work of the Department without risks to health and safety.
- Coordinating any safety advice given in the Department by specialist advisors and the University Safety Office.

- Monitoring health and safety within the Department and reporting any breaches of the Health and Safety Policy to me.
- Informing me and the Director of the University Safety Office if any significant new hazards are to be introduced to the Department.

The DSO's duties are described in University Policy Statement S1/01.

Maen Bazo is Deputy Departmental Safety Officer (DDSO).

To assist in this work, the Department has the following specialist advisors:

Medical Science Division Safety Officer (DivSO)

Graham Ross has been appointed to support the DSO and dDSO in their administrative, monitoring and advisory role.

Departmental Fire Officer

Maen Bazo is responsible for advising the DSO on all matters relating to fire precautions and fire prevention in compliance with University Health and Safety Policy.

Fire marshals for specific areas

WW JR Hospital

Tiphaine Bouriez-Jones/Maen Bazo/

Clarissa Marley/Tyciane Benetton Justi

Paul Robinson/Heidi Crook/ Charlotte Smith/ Sally Lacy

FMRIB Centre

Duncan Mortimer/David Flitney/Sue Field/

Matthew Webster

Wolfson Building

Mary Sneade / Michelle Wilson/ Fiona Cuthbertson/

Stacey DaSilva

Departmental Biological Safety Officer (BSO)

Tiphaine Bouriez-Jones is responsible for advice on all matters relating to biological safety, and in particular on the implementation of University Policy Statement S5/09. The BSO's duties are described in University Policy Statement S5/09.

Maen Bazo is appointed as the Deputy Biological Safety Officer, with the role of supporting the BSO in her duties.

Departmental Safety Advisory Committee (DSAC)

In addition to the above arrangements I have set up a Departmental Safety Advisory Committee, whose functions are set out in University Policy Statement S2/01 and whose membership comprises:

Head of Department

Kevin Talbot

Department Safety Officer
and Biological Safety Officer

Tiphaine Bouriez-Jones

Deputy DSO

Maen Bazo

Department Laser Supervisor

Katie Warnaby

Senior Radiation Protection Supervisor

Leslie Jacobson

WIMM

Judith Cossins

Wolfson Building

Vacancy

WW Charles Wolfson Facility

Flavie Torrecillos

WW Neuropathology

Hannah Brooks

WW Metro-neurology

Brenda Cooley

FMRIB

Jon Campbell/Michael Sanders

JR OxSTAR

Wendy Washbourn

WW NDCN administration
OMPI/SCNI
BNDU
DivSO
CVM DSO

Scott Thomson
Steven Hughes
Andrew Sharott
Graham Ross
James Brown

The Committee is expected to review the implementation of new University Health and Safety Policy Statements and to review accident/incident reports forwarded to the Safety Office. Other matters for discussion should include the results of Departmental inspections and prior consideration of the introduction of new and significant risks.

It will meet termly.

Senior Radiation Protection Supervisor (SRPS)

Leslie Jacobson is directly responsible to me for ensuring compliance with the Ionising Radiation Regulations 1999 and Local Rules made to comply with these Regulations. The SRPS is also responsible for ensuring compliance with the Radioactive Substances Act 1993 and certificates granted under it. This is a supervisory role, the SRPS having the Head's authority to direct others.

Departmental Radiation Protection Committee

The Radiation Protection Committee comprises meeting as part of the WW DSA Committee:

SRPS	Leslie Jacobson
Radiation Protection Supervisor (WIMM)	Leslie Jacobson (WW)/Weiwei Lui (WIMM)/ Susan Maxwell

Genetic Modification Safety Committee

I have also set up a Joint Genetic Modification Safety Committee for the West Wing JR, in agreement with the Head of Department of Cardiovascular Medicine, whose functions are set out in University Policy Statement S5/09 and whose membership comprises:

Biological Safety Officer and DSO	Tiphaine Bouriez-Jones
Deputy Biological Safety Officer	Maen Bazo
Cardiovascular Medicine Rep.	James Brown
Cardiovascular medicine BSO	Charles Redwood
Senior Postdoctoral Research Fellow	Ruxandra Dafinca
Clinical Neurology Rep.	Patrick Waters
Div Safety Officer	Julie Hamilton
University Biological Safety Officer	Tracey Mustoe

The Committee's terms of reference are to assess the veracity of new GMO risk assessments, to review the annual GMO returns, to advise the Department Biological Safety Officer (DBSO) and to maintain the highest levels of safety within the site. (University Policy Statement S2/08)

It will meet annually in person but GM Risk Assessments will be circulated to the committee for approval as needed.

Magnet Safety Advisory Committee

The committee has a remit to oversee the MRI-related safety of all activities carried out at FMRIB. This particularly includes:

- Setting safety policy, particularly in regard to magnet safety.
- Reviewing risk assessments related to magnet safety or research procedures being carried out on human volunteers.
- Reviewing or making decisions about the safety of implants and devices used in the MRI scanners.

The committee's membership comprises:

Director, FMRIB	Heidi Johansen-Berg
Associate Director, OHBA	Clare Mackay
DSO	Tiphaine Bouriez-Jones
MR Physicists	Stuart Clare/Aaron Hess/Sebastian Rieger
Clinicians with MR knowledge	Vishvarani Wanigasekera/Johannes Klein
Lead Radiographers	Jon Campbell/Michael Sanders/Juliet Semple
Representative FMRIB researchers	Charlotte Stagg/Gwenaelle Douaud
FMRIB Admin/Committee Secretary	Nancy Rawlings

This committee will meet termly.

3. OTHER SAFETY FUNCTIONS

Accident and Incident Reporting

Tiphaine Bouriez-Jones and Maen Bazo are responsible for reviewing incidents and accidents reports using the online IRIS software, communicating with relevant local DSO where an incident occurs in a building managed by another Department and DivSO if an investigation is required.

First Aid Arrangements

All NDCN space has first aiders in place, who hold a current certificate for First Aid at Work training. WIMM, BNDU and NBB arrangements are as per the local safety arrangements.

Additionally, NDCN space on the JR site benefits from the Trust OUHFT emergency medical response system (by dialling 2222 from an OUH phone), and a crash team will attend immediately if required.

Due to the nature of the varied research taking place in the Department, local arrangements for First Aid equipment may vary details of which can be found in NDCN Safety Policy 015 First Aid Provision.

Departmental Laser Supervisor (DLS)

Katie Warnaby is responsible for advising the DSO on the use of laser systems and in particular for the implementation of University Policy Statement S2/09, which also outlines the other duties of a Departmental Laser Supervisor.

Departmental Electrical Safety

Bouygues FM is responsible for fixed electrical systems for the WW (all Levels), **University Estates** is responsible for fixed electrical systems in the FMRIB and Wolfson Building.

Maen Bazo is locally the Departmental Electrical Safety Adviser who will provide advice on suitability of appliances and projects involving electrical work.

Display Screen Equipment

I have appointed the following people as Display Screen Assessors:

Stacey DaSilva, Maen Bazo, Duncan Mortimer and Tiphaine Bouriez-Jones (who will also be the DSE Coordinator).

Manual Handling Assessor

I have appointed **Maen Bazo** as Manual Handling Assessor.

Travel Administrator

Human Resources will be checking that a suitable field work risk assessment is in place and that the insurance application meets the department's requirements.

4. TRADES UNIONS AND APPOINTED SAFETY REPRESENTATIVES

University Policy Statement S2/13 sets out the arrangements for dealing with trade unions and their appointed safety representatives. Employees who wish to consult their safety representatives should contact the senior safety representative of the appropriate trade union.

UCU: <http://www.oxforducu.org.uk>

Unite: <http://users.ox.ac.uk/~unite>

UNISON: <http://users.ox.ac.uk/~unison>

5. INDIVIDUAL RESPONSIBILITY

All Departmental employees, all students and all other persons entering onto the Department's premises or who are involved in Departmental activities have a duty to exercise care in relation to themselves and others who may be affected by their actions. Those in immediate charge of visitors and contractors should ensure that those persons adhere to the requirements of University Health and Safety Policy.

Individuals must:

- Make sure that their work is carried out in accordance with University Safety Policy.
- Protect themselves and others by properly using any safety equipment or devices (e.g. machinery guards) provided.
- Protect themselves by properly wearing any personal protective equipment that is required.
- Obey all instructions emanating from the Head of Department in respect of health and safety.
- Generate and maintain suitable risk assessment for their activities.
- Behave in a safety conscious manner as a core aspect of their work.
- Warn me and the DSO/ASO **Tiphaine-Bouriez Jones/Graham Ross** of any significant new hazards to be introduced to the department, or of newly identified significant risks found on the premises or in existing procedures.
- Ensure that their visitors, including contractors, have a named contact within the department with whom to liaise.
- Attend training where managers identify it as necessary for health and safety.
- Register and attend for health surveillance with the Occupational Health Service when required by University Safety Policy.
- Report all fires, incidents, and accidents immediately to Tiphaine Bouriez-Jones or Maen Bazo.
- Familiarise themselves with the location of firefighting equipment, alarm points and escape routes, and with the associated fire alarm and evacuation procedures.

Individuals should:

- Report any conditions, or defects in equipment or procedures, that they believe might present a risk to their health and safety (or that of others) so that suitable remedial action can be taken.
- Offer any advice and suggestions that they think may improve health and safety.
- Note that University Policy Statements are available on the web at:
<http://www.admin.ox.ac.uk/safety/policy-statements/> and can be supplied on request at WW Level 6 Reception.

6. SPECIFIC SIGNIFICANT RISKS

The following areas/activities have been identified as significant risks in this Department:

Risk - High-power magnets

- Location – FMRIB building
- Activities – screening of patients and volunteers
- Documentations – stored locally in FMRIB

Cryogenic liquids

- Location – Level 5 West Wing
- Activities – Access to Liquid Nitrogen vapour phase, dispensing of Liquid Nitrogen
- Documentations – Held centrally by NDCN DSO

Laboratory Animals Allergens (LAA)

- Location - Animal units.

- Activities - Animal and animal tissue handling.
- Documentation – Held by NACWO and research groups.

Lasers

- Location - Level 1
- Activities - Imaging (CL1 by design) and Pain stimulus (latter not in use currently)
- Documentation – Held centrally by NDCN DSO

Ionising radiation

- Location - Level 5 West Wing and WIMM.
- Activities – Open sources used in conjunction with research projects
- Documentation – Held locally by SRPS.

Compressed gases

- Location – Level 5, Level 1 (West Wing), FMRIB and Wolfson.
- Activities – Provision of gas for various research activities.
- Documentation – Held centrally by NDCN DSO, available on Department internal pages.

Risk – Manual handling

- Location – Level 5 and LG1 (West Wing).
- Activities – Weekly filling of liquid nitrogen dewars (2 x 240L dewar and 25L “onion” dewar).
- Documentation – Held centrally by NDCN DSO, available on Department internal pages.

Risk – Hazardous substances

- Location – Level 5 laboratories.
- Activities – Research laboratories.
- Documentation – Held locally by the research groups.

Risk – Workshop/Electrophysiology rooms

- Location – BNDU.
- Activities – Soldering, 3D printing.
- Documentation – Held locally by the Research Supervisors.

Risk – Clinical activity

- Location – FMRIB, Wolfson and West Wing (level 3 “pain lab”).
- Activities – Blood taking from volunteers and research participant, injection of drugs as per clinical trial ethical approval.
- Documentation – Held locally by the clinical trial teams.

Risk – Field work

- Location : Kenya, South Africa, India, Brazil, Zimbabwe....
- Activities: tbc
- Documentation: tbc

Signed:

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Date:24th May 2021.....

Professor Kevin Talbot
Head of the Department of Clinical Neurosciences
ANNEX

It is my responsibility, as Head of Nuffield Department of Clinical Neurosciences directly or through written delegation:

1. To ensure adherence to the University's Health and Safety Policy and to ensure that sufficient resources are made available for this.
2. To plan, organise, control, monitor, and review the arrangements for health and safety, including the arrangements for students, contractors, and other visitors, and to strive for continuous improvements in performance.
3. To carry out general and specific risk assessments as required by health and safety legislation and University Safety Policy.
4. To ensure that all work procedures under my control are, as far as is reasonably practicable, safe and without risks to health.
5. To ensure that training and instruction have been given in all relevant policies and procedures, including emergency procedures.
6. To keep a record of all cases of ill health, accidents, hazardous incidents and fires, to report them to the University Safety Office, and to ensure any serious or potentially serious accidents, incidents, or fires are reported without delay.
7. To inform the University Safety Office before any significant hazards are introduced or when significant hazards are newly identified.