

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/WIN Annex

OxStaR, Modular building accessed via Level 3, Main hospital

Kadoorie Centre – Level 3, Main hospital

Weatherall Institute of Molecular Medicine (WIMM)

Dorothy Crowfoot Hodgkin Building (Formerly known as New Biochemistry Building (NBB))

Pharmacology Building (Brain Network Dynamics Unit - BNDU)

Biomedical Services Building (BSB)

Cardiovascular Medicine (CVM) Radcliffe Department of Medicine is located on Level 5 and Level 6 - WW.

Oxford Functional Neuroscience (OFN) Nuffield Department of Surgical Sciences is partly on Level 6 - WW.

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.

Cardiovascular Medicine (CVM) Radcliffe Department of Medicine share laboratory and office space with the Nuffield Department of Clinical Neurosciences (NDCN) on Levels 5 and 6 in the West Wing. An agreement is in place whereby the NDCN Facilities Team manage some aspects of safety on behalf of CVM, including fire safety, biosafety, genetic modification and liquid nitrogen provision; this is undertaken in close consultation with the CVM Admin Team and Laboratory Manager to ensure compliance with H&S by departmental staff, students and visitors working in CVM laboratories and offices, safety is discussed within the NDCN DSAC.

Oxford Functional Neuroscience (OFN) Nuffield Department of Surgical Sciences occupy office 67-22 within the Nuffield Department of Clinical Neurosciences (NDCN) on Levels 6 in the West Wing. NDCN Facilities team also provides OFN with occasional support, there is no formal agreement in place.

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 **Sally Franklin** and the Medical Science Division Safety Officer **Amanda Anderson** 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, **Sally Franklin** 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 **Sally Franklin** 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 **Hannah Fox** as the senior radiation protection supervisor (SRPS) and she is directly responsible to me for the day to day coordination of radiation protection arrangements within the Department and supervision of 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. **Susan Maxwell** is RPS for WIMM.

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)

Sally Franklin 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)

Amanda Anderson 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
FMRIB Centre
Wolfson Building

**Maen Bazo/ Paul Robinson/Sally Lacy/Mickey Ford
Duncan Mortimer/David Flitney/Matthew Webster
Mary Sneade/Fiona Cuthbertson**

Departmental Biological Safety Officer (BSO)

Sally Franklin 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
Dept Safety/Biological Safety Officer
Deputy DSO
DivSO
CVM DSO

**Kevin Talbot
Sally Franklin
Maen Bazo
Amanda Anderson
James Brown**

Department Laser Supervisor
Senior Radiation Protection Supervisor
WIMM/Radiation Protection Supervisor
Wolfson Building
WW Charles Wolfson Facility
WW Neuropathology
FMRIB
JR OxSTAR
WW NDCN administration
DCHB
BNDU
BSB

Sean Smart
Hannah Fox
Susan Maxwell
Julia Duerden
Ben Edwards
Hannah Brooks/Carolyn Sloan
Jon Campbell/Michael Sanders
Wendy Washbourn
Moira Westwood
Lara Robinson/Lara Nickel (Dphil Rep)
Ben Edwards
Sean Smart

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, or at least twice a year.

Senior Radiation Protection Supervisor (SRPS)

Hannah Fox 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
Radiation Protection Supervisor

Hannah Fox
Susan Maxwell (WIMM)

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:

Divisional Safety Officer (MSD)
Biological Safety Officer and DSO
Deputy Biological Safety Officer
Cardiovascular Medicine Rep.
Cardiovascular medicine BSO
Clinical Neurology Representative
Senior Postdoctoral Research Fellow
University Biological Safety Officer

Amanda Anderson
Sally Franklin
Maen Bazo
James Brown
Charles Redwood
Patrick Waters
Ruxandra Dafinca
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.

This committee will meet termly or at least biannually. The committee's membership comprises of:

Director, FMRIB
Associate Director, OHBA
Divisional Safety Officer (MSD)
DSO
MR Physicists
Clinicians with MR knowledge
Lead Radiographers
Representative FMRIB researchers
FMRIB Admin/Committee Secretary

Heidi Johansen-Berg
Clare Mackay
Amanda Anderson
Sally Franklin
Stuart Clare/Aaron Hess/Sebastian Rieger
Vishvarani Wanigasekera/Johannes Klein/Ben Seymour
Jon Campbell/Michael Sanders/Juliet Semple/Nicola Aikin
Gwenaelle Douaud/ Melanie Fleming
Nancy Rawlings

3. OTHER SAFETY FUNCTIONS

Accident and Incident Reporting

Sally Franklin 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, BSB 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)

Sean Smart 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

Equans 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: **Cecilia Lee-Bargagna** and **Sally Franklin**
Larissa Voltolini is 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.
- Inform me and the DSO/ASO **Sally Franklin/Amanda Anderson** 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 near misses, incidents and accidents immediately on to IRIS and/or DSO **Sally Franklin** or **Maen Baso** Deputy DSO.
- Familiarise themselves with the location of fire-fighting 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, Home Office approved rooms.
- Activities - Animal and animal tissue handling.
- Documentation – Held by NACWO and research groups.

Lasers

- Location – Level 1 and Level 5 (West Wing)
- 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 – FMRI, 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: Oxfordshire and other adjacent home counties.
- Activities: Studies involving human participants and public engagement days.
- Documentation: CUREC Forms, consent forms, questionnaires, checklists, information sheets, risk assessments and protocols.

Signed: **Date:**

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.