

22 January 2015, 1430, Seminar Room, Safety Office

Present: Dr M Wills (Chairman), Ms L Hinton-Mead (Secretary), Dr G Christie, Mr M Elsdon, Mr T Fitzmaurice, Mrs M Gentry, Dr A Gilliland, Dr J Kumita, Dr G Martell, Dr T O'Connell, Dr K Tibbles, Dr L Tiley, Dr M Vinnell and Ms R Williams

In attendance: Ms L Dopson

1 Apologies for absence

Ms E van Gijn, Professor S Ozanne, Dr A Shortland, Mr J Winters, Mr J Wright

2 Minutes of the Sub-committee meeting held on Thursday 23 October 2014

The members approved the Minutes which were then signed by the Chairman.

3 Matters arising from the Minutes

Minute 4.3 (meeting 23.10.14) *Membership*

Professor S Efstathiou has now left the University and a suitable member from the School of the Biological Sciences is being actively sought.

Estate Management has been asked to clarify its representation on the Sub-committee.

4 Report from Sub-committee for Chemical Safety

Dr Tiley reported that the draft Health Surveillance Policy and Guidance document (HSD074M) had been considered at the meeting. There was a particular issue in that the COSHH Health Record Form although suitable for chemicals was not appropriate from a biological point of view and he therefore felt that a separate biological form should be devised.

He also commented that CL3 pathogen exposure is something that should be considered by the CL3 Working Group.

5 Codes of Practice/Leaflets/Policies etc

5.1 Health Surveillance Policy and Guidance (HSD074M)

The Consultant Occupational Physician introduced the draft document, which had been circulated with the agenda, and informed members that Occupational Health would like feedback and comment from individuals as soon as possible. She agreed with Dr Tiley that the Health Record Form was not in a suitable format for biological agents (see Minute 4). Comments on the draft should be directed to Ms L Smith by 30 January 2015, though comments received after that can be taken into consideration at a later stage or on revision.

Lengthy discussion ensued. Dr Tiley suggested that a flow chart should be devised for the process including: who keeps the record and how it is updated, and also a record of who is no longer registered for CL3 work. It was suggested that a short paragraph be added to the Health Surveillance document to reference the biological form so as not to hold up the progress of the document through committees ie they could become appendices. Dr Tiley volunteered to draft a form and flow chart.

Dr Tibbles reminded the Sub-committee that those working with animals and GMOs would need to be considered too. After further discussion, Dr Tibbles also pointed out that the text of the Safe Biological Practice (purple book) regarding oncogenes does not marry up with the information in this Document, which will need to be addressed.

- Action:**
- Sub-committee members to comment on Document
 - Dr Tiley to draw up a 'biological health record form' and flow chart of the process
 - Elements of Safe Biological Practice to be reviewed/revised

5.2 *Hepatitis B Vaccine Policy*

Dr Wills introduced his paper (*BS/1415/10*) and opened discussion amongst members on the development of a University policy with regard to this matter.

The Director of Health and Safety stated that there are several issues to consider including:

- Disclaimers are not recognised in law.
- Courts would judge the University on the content of any University policy.
- Issues as to whether the Hep B vaccination is necessary for the work to be undertaken or whether there are alternatives, for example adjustments to the person's working techniques?
- What has the person actually been employed to do – what is in their contract?

The Consultant Occupational Physician remarked that receiving a vaccination is a personal choice and the issue would need to be managed on an individual basis and the person would need to see Occupational Health as there might be alternatives to receiving the vaccine. The Safety Officer, School of the Biological Sciences emphasised that it needs to be an *informed* decision on the part of the worker. The Director of Health and Safety also emphasised that vaccination can only ever be a recommendation as it is not possible to make it mandatory.

Dr Wills commented that other comparable universities have an immunisation policy and that he felt that this University should have a policy too. The Consultant Occupational Physician agreed that this would be very helpful from the Occupational Health perspective.

Dr O'Connell mentioned that when determining policy it would need to include fieldwork and travel, not just laboratory work. The Chairman asked the Consultant Occupational Physician to progress the matter of developing an immunisation policy for the University with her colleagues in Occupational Health.

- Action:** The Consultant Occupational Physician to take the matter of production of a University immunisation policy to Occupational Health with a view to devising a policy.

Other

The Secretary reported that the template risk assessment form: 'Risk Assessment for Biological Agents and/or material that may contain these' will shortly be added to the website.

- Action:** Ms Dopson to put the form onto the Safety Office website.

6 **Reports on Visits and Inspections**

6.1 **External**

26.11.14 – The Safety Officer, School of the Biological Sciences reported that an HSE Regulatory Compliance Officer had paid a visit to the WT-MRC Stem Cell Institute. The facilities were found to be extremely well managed; the paperwork in good order and that everything was 'fine'. He also mentioned that the Institute had found this to be a very useful exercise as it had prompted them to review/revise all their policies.

19.12.14 – there had been a routine visit by APHA (Fera) to the Dept of Plant Sciences.

Dr Tiley reported a recent routine visit by the CTSA

6.2 Internal

Nothing to report.

7 Stevenage Bioscience Catalyst (SBC)

Veterinary Medicine may have a worker(s) located at SBC but nothing further has been heard regarding any GM risk assessments to be viewed by the Sub-committee.

8 Containment Level 3 (CL3)

The Secretary reported that a case had been made on the recommendation of the CL3 Working Group for a hands-on pan-University CL3 Manager. The Director of Health and Safety responded that although a good case had been made such a development would take some time to achieve.

9 DEFRA

9.1 SAPO

The Assistant Biological/General Safety Adviser spoke to her paper (*BS/1415/11*). She reported that Defra had issued a revised SAPO licence on the basis of the HSE's recommendations for PRV work to begin on the Addenbrooke's site.

The Sub-committee was also informed that Defra has changed the contact for licences to import SAPO agents from outside the EU. The new section is based in Carlisle.

10 Counter-Terrorism

Nothing to report.

11 Database/ASQ/Auditing Biological Safety

With regard to the Annual Biological Safety Questionnaire, the Secretary reported that there were now only two outstanding returns – Academic Neurosurgery and Nanoscience.

Action: The Safety Officer, School of Clinical Medicine to contact Academic Neurosurgery (Clinical Neuroscience) regarding their return and the Assistant Biological/General Safety Adviser to contact Nanoscience (Engineering) for their return.

12 Biological Safety Officers

Nothing to report.

13 Training

13.1 Annual BSO Event (Tuesday 19 May 2015)

The Secretary reported that the Sainsbury Laboratory had now been booked. She commented that the programme was still in development, but a request had been received for risk assessment of lentiviruses and also how a BSO 'manages' their department. Ms Williams suggested that Hep B and the principle of vaccination would be a useful topic to cover. Dr Tiley suggested the topic of high containment FACS sorting, if not for this BSO Event, then for 2016. The Secretary asked the members to contact her with further ideas for topics and speakers.

13.2 **DBSO Competency**

The Secretary plus the relevant School Safety Officer or the Assistant Biological/General Safety Adviser, as appropriate, plan to continue with the induction of newly appointed BSOs into their role on an individual basis as, although time consuming, this is found to be effective.

13.3 **IATA**

The Secretary reminded members that the full IATA course will run from 1-3 June 2015 and the '6.2 course' will run on 9 July 2015. The Secretary informed the Sub-committee that not many people had so far enrolled on either course. A reminder will be sent out from the Safety Office, but the Secretary also urged the members to remind their individual departments about these courses.

16 **Miscellaneous**

16.3 **Report from the Safety Officer, School of Clinical Medicine**

This item was brought forward for discussion at this point to enable the Safety Officer, School of Clinical Medicine to attend another meeting. He proceeded to give an update on the projects – Bellatrix and Capella. Both will have CL3 facilities; the majority of wet laboratories will be at CL2 and under negative pressure in order to make areas more easily adaptable to differing requirements.

The Safety Officer, School of Clinical Medicine left the meeting at 3.40pm.

14 **Health and Safety Executive**

Nothing to report.

15 **Accidents/Incidents**

15.1 **Nothing to report regarding the general Accident/Incident report (BS/1415/13).**

Riddor Dangerous Occurrence

Dr Tiley spoke about an incident that had occurred in a CL3 laboratory. The cabinet had passed its KI test in February 2014, but when Bioquell re-tested the cabinet in December 2014 it failed, during the interval there had been no indication that something was amiss. Details of the incident can be found in the incident report from the Department, and may be available from the Secretary to the Sub-committee on request. The incident has been reported to HSE as a dangerous occurrence under RIDDOR. Dr O'Connell enquired whether a KI test is carried out as a matter of course following a spillage. Dr Tiley replied that it would normally be assumed that the cabinet was still working correctly and no automatic KI test would be carried out in these circumstances.

15.2 ***Learning lessons from an incident***

Dr Wills also informed the Sub-committee about an incident that had occurred in a CL3 laboratory. On a very cold night at a weekend in November 2014 a temperature monitor (frostat) which was part of the air handling system was activated causing the extract fans to stop and consequent loss of negative pressure in the laboratory. Until this incident occurred, it was not known that this frostat linkage even existed. There was no loss of containment and the situation has now been resolved, but this too could have resulted in a reportable dangerous occurrence had the circumstances been slightly different. The Chairman wished to put on record that it is increasingly difficult to know how a building management system interacts with a particular room.

Dr O'Connell left the meeting at 3.35pm.

16 Miscellaneous

16.1 Report from Estate Management

No representative was present from Estate Management. However, the Secretary reported that the information awaited from Estate Management on The Control of Legionella Bacteria in Water Systems (ACOP L8) had now been received with a request that the Sub-committee via the Safety Office send this out to departments on their behalf.

Action: Legionella information to be sent out on behalf of Estate Management.

16.2 Report from the Safety Officer, School of the Biological Sciences

The Safety Officer, School of the Biological Sciences, had nothing further to report.

16.3 Report from the Safety Officer, School of Clinical Medicine

Agenda item addressed earlier in the meeting following Item 13.3.

16.4 Reports from the University Health and Student Wellbeing Committee, the Advisory Group on Communicable Diseases and the HIV Aids Working Group

The Director of Health and Safety reported that the University position on Ebola is now available on the main University website.

He explained that OHSS has a role in determining if University personnel can 'work with' Ebola in any capacity in the field and thus are covered by University insurance. The Consultant Occupational Physician commented that such persons normally travel and work under the umbrella of a recognised group or NGO and are screened on their return; 'independent travellers' bear all insurance costs themselves.

16.5 Report from Consultative Committee for Safety (CCFS)

Nothing to report.

17 Information

Nothing to report.

18 Date of next meeting

Monday 13 April 2015 at the Safety Office, 16 Mill Lane starting at 1430. The Chairman reminded members that this date is a Monday instead of the usual Thursday.

The meeting closed at 1555.