Imperial College London

Code of Practice

Controlling access to hazardous or sensitive areas

Updated May 2011

Preface

1. This Code of Practice describes the procedures to be followed for securing sensitive or hazardous areas within Imperial College. It is directed at laboratory managers, laboratory workers, campus/ building managers, maintenance managers, those in control of contractors working on College premises and those responsible for the sensitive or hazardous areas.
2. Access control is not simply a matter of preventing entry to a particular room. In fact, successful access control is more a measure of how entry of those not normally authorised to work in that area is facilitated, whilst ensuring that security levels are maintained. This Code of Practice therefore describes not only the management aspects of preventing access, but also how to allow access when required for either routine or emergency purposes.
3. This Code of Practice does not describe College standards for security measures such as locks, card readers, cameras and alarms. College standards for these are provided elsewhere.

Definitions

Authorised personnel	These are laboratory or other personnel who are specifically authorised by the person responsible for the area (eg Principal Investigator, Facility Manager or Head of Department) to enter the area to conduct their work. The area represents their normal place of work. Cleaners (routine cleaners employed or contracted by the College) and other support staff such as maintenance, may be considered as authorised personnel to certain area providing they have received appropriate induction and are working to an agreed written protocol. Authorisation must be recorded in all cases.
Non-authorised personnel	College employees, visitors or contractors not previously and specifically authorised to enter particular laboratory areas. Their entry requirements are infrequent or 'one-off'.

Why control access to hazardous or sensitive areas?

4. Access to certain areas within the College must to be controlled for various reasons. Such reasons include:
    - Safety – to prevent exposure to hazardous substances and procedures
    - Security – to prevent theft of high risk materials, equipment or information
    - Environmental issues - e.g. to ensure control of how and what waste material is disposed of
    - Research continuity – to prevent sabotage or accidental damage to expensive and often unique equipment or data
    - Personal safety – to protect College staff working in sensitive areas
    - Legislative compliance – the prevention of unauthorised access to certain areas is a requirement under particular legislation e.g. Control of Substances Hazardous to Health Regulations, Genetically Modified Organisms (Contained Use) Regulations and the Anti-Terrorism Crime and Security Act

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Responsibilities

5. The responsibility for ensuring that access to a sensitive or hazardous area is adequately controlled rests ultimately with the person in charge of that area. However, access control is most effective when layered and therefore all College staff, contractors and authorised visitors will also have a responsibility in maintaining a secure environment within the College.

Controlling access through good practice

6. Even the most sophisticated locks, proximity card readers, cameras and alarms can be rendered ineffective through bad practice. The most common form of bad practice is when unauthorised persons are allowed through open doors by authorised staff or students. This is often done at the main entrance to buildings. Once inside the building it is very often possible for these unauthorised persons to gain access throughout a building, including to those areas containing wallets, laptops and other personal valuables, let alone sensitive or hazardous material. Therefore it is essential that College staff or students do not allow another person to gain entry through a control point without using their own proximity card.
7. Further examples of good security practice include the following:
    - Ensuring doors are closed and locked after having passed through
    - Immediate reporting of defective security measures through the HelpDesk (x48000)
    - Wearing of college I.D. badges at all times
    - Challenging of people that you do not recognise as authorised for that area. Never put yourself at risk and if you feel threatened call the security
    - For sensitive or hazardous areas, the person responsible for that area should also regularly request and check a list of those persons with access permissions on the College's access control system
    - Considering security issues as part of routine safety inspections

Controlling access by clear identification of any restricted areas

8. All areas within the College's research buildings should be categorised into one of four groups according to the levels of access control required. The four groups are:
    - Highly restricted access
    - Restricted access
    - Limited access
    - Normal access
9. The criteria for classification within these groups is summarised in Appendix A and a flow chart summarising the designation process is included in Appendix H.
10. The first three of these types of areas are labelled using the appropriate red, amber or yellow sticker placed above the door handle. Colour coding criteria for each group is also described in Appendix A. Note that the lowest risk areas (ie normal access) are not colour coded.
11. Red (highly restricted) and amber (restricted) areas can only be demarcated as such upon specific authority provided by the Safety Department. This is so as to prevent misuse of this system and so as to ensure that adequate emergency and lone working procedures are in place. In order to apply for a licence for such an area, the application form can be downloaded and once completed, sent to s.joomun@imperial.ac.uk along with the written procedures requested in the application form. A minimum requirement is that the details must be provided on the standard ERP template form – Emergency Response Plan and Access Control Procedures (see Appendix G for an example of a completed form). For more complex areas such as Containment Level 3 facilities, we would expect to receive an up-to-date copy of the Code of Practice for the area in addition.
12. When designating areas, it is the departments responsibility to train all authorised users with regard to the implications and to ensure that any training is recorded and up-to-date. If deemed necessary, any specialist local training for Maintenance, Security and cleaning staff should also be considered.
13. It is important to note that this access control 'traffic light' system is intended to supplement but not replace traditional safety signage. It is essential though that any conflicting or potentially confusing signage is removed before placement of the new red, amber or yellow signs.

Controlling access by limiting who has access permission to particular areas

14. The underpinning physical access control measure within the College is the *Lenel* Proximity Card and reader system. Access permissions for any specific reader is carried on the staff or students' proximity card and, when presented to the card reader, will open the door. Higher risk areas are also often protected with a PIN number.
15. Access permissions for all College staff, students and visitors are administered by Security. In order to ensure that only authorised persons have access permissions to 'red' and 'amber' areas then the following procedures should be followed:
    - Via the licensing system (see Paragraph 13) the Safety Department will be informed of the card reader identification numbers and of the person(s) authorised to request access permissions for these readers. This person is usually either the Principal investigator or their Lab Manager. Access permissions cannot be requested by any other person other than that named and registered under the licence
    - The Safety Department will pass on this information to College Security (at ID.card@imperial.ac.uk)
    - Ensure that your internal procedures for establishing when a staff member or student is adequately trained, vaccinated (if relevant) and security checked (if relevant) are in place and that a record of these are kept
    - The authorised person must request for changes to access permissions by email at ID.card@imperial.ac.uk
    - The authorised person must maintain records of all relevant communications
    - The authorised person will receive monthly verification from Security concerning which individuals have current access to the area.
16. For limited (yellow) or normal access areas access permissions can be requested by the PI, Lab Manager or the Building Manager. Again these permissions are administered by Security at ID.card@imperial.ac.uk

Controlling access by Permit-to-Work

17. Restriction on access to laboratories is part of the overall strategy for controlling risk within all College areas. Permit-To-Work systems are key in the management of controlling such access to those persons not normally authorised to enter and are of particular importance in laboratory or plant room areas.
18. The 'Laboratories and Associated Areas Permit-To-Work' form is part of a range of Permits in use within the College. The Laboratories permit is intended for **use by those in charge of laboratories in order for them to control routine access to their areas and to identify hazards and risks generated by their own work to those that may have to enter the area**. It is not intended that other risks associated with the work, such as electrical or gas isolations, are identified within this permit. Such facility items are dealt with by Facilities Management and will be controlled using separate Permits. It is essential however, that Estates (via the Campus or Building Manager) are made aware of any works that may affect, or involve, the fabric or any services. If in doubt, the Campus or Building Manager must be consulted.
19. The laboratories permit-to-work form:
    - Identifies the nature of the work, the location, the date and timescale and the personnel involved.
    - Has a unique reference number which assists tracking and record keeping. Hard copies will normally have pre-printed tracking numbers on the form. If the electronic version is used, the person in charge of the area will need to maintain and issue a unique series of numbers for their permits (see also paragraph 20 below)
    - Identifies all of the hazards and risks involved in the work and states the required precautions for each.

The procedure for issuing a Laboratories Permit-To-Work

20. The procedure for issuing a laboratories permit-to-work is as follows;

- Blank triplicate hardcopies of the form are available as pads of 25 permits from the Campus or Building Manager OR a soft version can be downloaded from the Safety Department website.
- A Permit-to-Work must be issued by the Lab Manager or other authorised person who has the necessary knowledge and experience to recognise the risks and the required control measures.
- The form must be accepted by the operative or contractor – this person must acknowledge that all requirements are understood.
- The form must be signed in Sections 2 and 3 by both parties prior to the work commencing.
- The form must be displayed in a prominent position (e.g. laboratory door) for the duration of the works.
- Once the work is complete the form must be signed off (Section 4) as such by the person conducting the work.
- The Lab Manager must sign Section 5 of the form once confident that the works have been completed satisfactorily and that the laboratory areas affected can now be made operational.
- Those using electronic versions of the Permit must make 2 copies of the signed and completed forms. They must retain the original whilst the first copy is given to the contractor and the second is sent to the Campus or Building Manager.
- For those using the hardcopy pads, the instructions on the form must be followed so that the Lab Manager and contractor each retain a copy and, once the pad of 25 is complete, the used pads (including the 3rd copy of each Permit), sent to the Campus or Building Manager.
- An example of a completed permit-to-work form may be found within this guidance in Appendix F

Emergency access

21. Emergency access by its very nature is urgent and there may be little time for assessing and controlling risks - personal judgement and 'dynamic' risk assessment may be required as demanded by any given situation. However, forward emergency planning for foreseeable situations, good communication arrangements and in some cases, good design strategies can help to make emergency situations easier to manage.
22. In most facilities within the College, true emergencies such as fire, flood, gas leak or medical emergency within normally restricted areas will necessitate that Maintenance or Security personnel by-pass normal Permit procedures. There are exceptions to this principle whereby access to microbiological Containment Level 3 facilities by non-authorised personnel is prohibited even in the event of emergency. Such facilities will have documented procedures for responding to all credible emergencies. See Appendix E of this guidance for further details.

Managing change

Change in room ownership or use

23. If an area becomes within the jurisdiction of a new Faculty, Division, Dept or Group then the responsibility for ensuring that the risks associated with the new work within this area are adequately controlled. Similarly, access control criteria (whether physical or managerial) rests with the new owners.
24. It is essential that before vacating an area, those leaving adequately clear the space and ensure that it is left in a safe state. The necessary clearance certificates must be provided.
25. If a change in use results in an area being downgraded from amber or red to yellow (or uncoded), then the Safety Department must be notified to ensure that the license and ERP is revoked.
26. If a red or amber designated area is not subject to a change of status but circumstances dictate that there are significant changes to the ERP, then the Safety Department must be notified and provided with an updated version of the ERP for forwarding to Security.

Change in personnel

27. It is the responsibility of the person in charge of the area to ensure that changes in personnel are appropriately managed. This will include the removal of access permissions for workers leaving and the appropriate training and authorisation of new workers.
28. Where changes to personnel result in contact details on the ERP changing, then the updated ERP must be forwarded to the Safety Department so that it can subsequently be forwarded to Security.

Appendix A Key criteria for access control coding

Key criteria for access control coding of Imperial College areas

		Access restrictions	Type of area	Routine access	Emergency access
LICENSING REQUIRED	highly restricted access RED	Access to named authorised personnel only even in emergency	Highly restricted areas such as Containment Level 3 laboratories, CBS holding rooms, radiation controlled areas or those containing sensitive or expensive equipment	Trained and authorised researchers Permit-to-Work required for all works and cleaning as defined in College guidance	Strictly controlled by pre-established written protocol only
LICENSING REQUIRED	restricted access AMBER	Access to named authorised personnel only. Access allowed for Facilities Management in emergency only (with the exception of plant rooms)	Restricted areas such as Containment Level 3 suite corridors, CBS corridors and offices, laser labs and plant rooms	Trained and authorised researchers (or maintenance staff in the case of plant rooms) Permit-to-Work required for all works and cleaning as defined in College guidance	Response by FM or Security can be facilitated without the users but only by pre-established and specific protocol
NO LICENSING REQUIRED	limited access YELLOW	Access to named authorised personnel only. Access to authorised cleaners allowed. Access allowed for Facilities Management in emergency only.	Restricted areas such as Containment Level 2 laboratories and other general laboratories	Trained and authorised researchers Trained and authorised cleaners with specified duties Permit-to-Work required for all works and non-routine cleaning as defined in College guidance	Response by FM or Security can be facilitated without the users. Generic response protocols will apply
NO LICENSING REQUIRED	Uncoded areas	No restriction to authorised building users or visitors UNLESS other signage indicates that access is restricted to authorised persons. Always obey safety signage.	All other areas	No restriction	No restriction

Appendix B Procedures for Room Entry Only

Examples of reasons for room entry only	Type of Area (access control colour)	Procedures	Specific Responsibilities
• Visual inspection of services by maintenance staff. • Showing prospective employees or other visitors around. • Safety inspections. • Security patrols	Yellow	1. A clear need for entering the laboratory must be established.	Principal Investigator in conjunction with non-authorised person.
		2. All hazards must be considered and all risks adequately controlled.	Principal Investigator. Individual laboratory workers must take reasonable care of their own health and safety and that of others who may be required to enter the area.
		3. Entry is allowed if: a) The non-authorised person is accompanied (this is mandatory when the non-authorised person is not a College employee). or b) With reference to points 1 and 2, explicit permission is given for the non-authorised person to enter alone (verbal permission is acceptable when the non-authorised person is a College employee e.g. a member of the maintenance staff).	Principal Investigator to accompany or delegate to other member of staff. Non-authorised person must not enter the laboratory unaccompaned. Principal Investigator or delegated member of staff must give explicit permission. Non-authorised person must not enter the laboratory without explicit permission. They may refuse entry if they feel it is unsafe. They must observe all safety signs and any verbal instructions. They must take reasonable care of their own health and safety and that of others.
		4. PPE is not mandatory*.	Non-authorised person must wear PPE if instructed to do so.
	Amber Red	1. As above. 2. As above. 3. Entry permitted if accompanied. ALL NON-AUTHORISED PERSONNEL MUST SIGN THE LABORATORY LOG BOOK. 4. The requirement for PPE shall be determined by the local rules for the facility.	The nominated manager shall control all aspects of entry into the facility. Local rules and local signage must clearly indicate who this person is. Non-authorised person must not enter the laboratory without following established procedures. They may refuse entry if they feel it is unsafe. They must observe all safety signs and any verbal instructions. They must take reasonable care of their own health and safety and that of others. They must wear PPE if instructed to do so.

* Laboratory coats should be worn wherever a person is liable to be exposed to hazardous substances and it is a good occupational hygiene rule to insist that all persons entering laboratory areas wear lab coats. It should be practicable, for example, for certain types of visitor to be provided with coats. However, there are certain anomalies such as laboratories that contain write-up areas (i.e. where the boundary between lab and 'office' becomes blurred) that may make this rule difficult to apply (though every effort is being made to remove write-up areas from laboratories). Providing other controls are in place and providing the non-authorised person is simply entering the room with no deliberate intention of contact with substances, equipment and surfaces then the wearing of a lab coat is not essential. It should be sufficient for Estates staff to wear their standard work clothes for simply entering labs. The final decision on whether a lab coat should be worn must be made on a local basis.

Appendix C Procedures for work involving laboratory or other equipment

Examples of work involving laboratory or other equipment	Type of area (access control colour)	Procedures	Specific Responsibilities
• Maintenance, servicing and inspection of equipment. • Installation of new equipment. • Removal of existing equipment. • Portable appliance testing. • Fire extinguisher testing. • Smoke / heat detector testing. • Filming and interviewing [#].	Yellow	1. A clear need for entering the laboratory should be established.	Principal Investigator in conjunction with non-authorised person.
		2. All risks in the vicinity of the equipment should be minimized before work is carried out (hazardous materials stored safely, hazardous waste disposed, work surfaces decontaminated etc. – see Section 4).	Principal Investigator. Individual laboratory workers must take reasonable care of their own health and safety and that of others who may be required to enter the area.
		3. As far as is reasonably practicable, each individual piece of equipment should be made 'safe' to work on. As a minimum, this would entail cleaning exposed surfaces to remove chemical / biological contamination and monitoring / swabbing of instruments which may have been used for radioisotope work. Disposable gloves should be worn providing dexterity is not affected. The requirement for other PPE should be determined by risk assessment.	Principal Investigator. Specific duties may be delegated to other laboratory staff.
		4. The above shall be verified by the completion of a formal permit-to-work (see Section 6).	The non-authorised person wishing to work on the equipment shall report to the responsible person prior to any work being carried out. The Principal Investigator or delegated person is responsible for completion of the permit-to-work form. The non-authorised person should sign the permit having understood all the requirements that need to be in place for the work to commence.
	Amber Red	1. As above. 2. As above. 3. As above with the additional requirement that ALL NON-AUTHORISED PERSONNEL MUST SIGN THE LABORATORY LOG BOOK UPON ENTRY 4. The requirement for PPE shall be determined by the local rules for the facility.	The nominated manager shall control all aspects of entry into the facility. Local rules and local signage must clearly indicate who this person is. Non-authorised person must not enter the laboratory without following established procedures. They may refuse entry if they feel it is unsafe. They must observe all safety signs and any verbal instructions. They must take reasonable care of their own health and safety and that of others. They must wear PPE if instructed to do so.

[#]Journalists may request that a laboratory is used for filming or as a backdrop for interviewing College staff. This will involve bringing cameras, cables and associated equipment into the laboratory. Therefore, it is important that all risks to journalists together with any risks introduced by their presence are adequately controlled. All necessary measures should be formally recorded on a permit-to-work form. This is incumbent on the Principal Investigator, though journalists have been known to request such documentation themselves before committing to enter a laboratory.

Appendix D Procedures for work affecting the fabric, structure or fittings in limited or restricted access areas

Examples of work affecting the structure, fabric or fittings	Type of area (access control colour)	Procedures	Specific Responsibilities
• Maintenance or installation operations on services e.g. pipes, ducting, electrics. • Plastering and painting. • Removal / installation of fixed items of furniture. • Replacement of fluorescent lights. • Replacement of air conditioning filters. • Replacement of ceiling tiles. • Annual window cleaning.	Yellow	1. All hazards must be considered and all risks adequately controlled. Thought should also be given to any risks which may be introduced by maintenance work e.g. naked flames, sparks. This should be determined by discussion with maintenance staff – they may be required to issue their own 'hot-work' permit. All necessary controls including the requirement for PPE shall be determined by risk assessment. It is highly likely that normal activities will need to be suspended for the duration of the work.	Principal Investigator in conjunction with non-authorised person.
		2. The above shall be verified by the completion of a formal permit-to-work.	The non-authorised person wishing to work on the structure or fabric shall report to the responsible person prior to any work being carried out. The Principal Investigator or delegated person is responsible for completion of the permit-to-work form. The non-authorised person should sign the permit having understood all the requirements that need to be in place for the work to commence.
	Amber Red	1. As above. Certain of these laboratories are required to be fully sealable therefore, any work involving penetrating the walls, floors or ceilings with cables, pipes or fixings may only be carried out following co-ordination with the Safety Department (contact College Biological Safety Officer x49421). 2. As above.	The nominated manager shall control all aspects of entry into the facility. Local rules and local signage must clearly indicate who this person is. Non-authorised person must not enter the laboratory without following established procedures. They may refuse entry if they feel it is unsafe. They must observe all safety signs and any verbal instructions. They must take reasonable care of their own health and safety and that of others. They must wear PPE if instructed to do so.

Appendix E Emergency access

Examples of reasons for emergency access	Type of area (access control colour)	Procedures	Specific Responsibilities
• Flooding • Smoke detected • Isolation valves require accessing • Medical emergency	Yellow	In most cases the emergency will override the access restriction to such areas. If emergency access is required then the entrant must only touch what they have to and must simply make the area safe. The person responsible for the area must be contacted as soon as possible.	Security, maintenance contractors and shift engineers must be aware of the limitations allowed within the realms of 'emergency access' i.e. that they should make safe only and leave the area immediately. 'Make safe' would be defined in such instances as stopping the leak, for example, and sealing the area to prevent further access to unauthorized persons.
	Amber	Emergency access is allowed by those trained and authorised to do. This will include certain security and maintenance staff specifically trained in entering these areas. In the event of any emergency then the persons identified in the emergency procedures must be contacted. Security or maintenance must NEVER enter without specific authority. The emergency services may not enter these areas and will await permission to do so.	Emergency procedures must be included in the Code of Practice for the area. All those involved in the implementation of these procedures must be trained in their execution.
	Red	Access to these areas is strictly limited to those with specific authority. In the event of any emergency then the persons identified in the emergency procedures must be contacted. Security or maintenance must NEVER enter without specific authority. The emergency services will not usually enter these areas and will await permission to do so.	Emergency procedures must be included in the Code of Practice for the area. All those involved in the implementation of these procedures must be trained in their execution.

Appendix F Example of completed Permit-to-Work Form

Imperial College London

PERMIT TO WORK

LABORATORIES AND ASSOCIATED AREAS

Permit Number:

1. PERMIT ISSUE DETAILS – to be completed by the Lab Manager (or other authorised person)

Title of work/nature of job: *Changing fluorescent tubes in laboratory lighting*

Description of work: *Removal and disposal of redundant fluorescent tubes and replacement with new tubes. Lights which need to be accessed are in centre of laboratory and can be reached by stepladder without recourse to standing on bench tops.*

Location of Work Area:
Building: X
Campus: X
Department/ Division: X
Room: X

Timescale of Work:
Time of required access: *10AM*
Date of required access: *Monday 20 Jan 2005*
Completion Time: *11AM*

Services affected:
None ☐ Electrical ☒ Piped gas ☐ Steam ☐ Water ☐ Other (specify):

Hazards:		Description:	Precautions:
Biological	☒	Containment Level 2 laboratory	1. Cease work in lab 30 min while job is being carried out 2. Store hazardous materials and waste in safe location 3. No specific bench decontamination procedure as light can be accessed from stepladder on floor
Chemical	☒	Standard laboratory hazardous chemicals – flammables, corrosives, etc	As above
Radiation	☐		
LASER	☐		
Compressed gases/ cryogenics	☒	2 x CO_2 cylinders and 1 x 60 L liquid Nitrogen dewar in lab	No specific precautions – cylinders and dewar located well away from work area
Other	☒	Fragile fluorescent light tubes	Electrician to remove old tubes from laboratory for appropriate disposal on completion of job

2. PERMIT ISSUE – this declaration must signed by the Lab Manager (or other authorised person)

I confirm that the above work can be carried out and that I have informed all local staff whose work may be affected that their work shall be suspended.

Lab Manager's (or other authorised person's) name: *John Smith* **Signature:** *J. Smith*

Date: 19/01/2005 **Time:** *17:00*

3. PERMIT RECEIPT – this declaration must be signed by the operative or contractor

I have read and understood the precautions required and the restrictions placed on the time and place of work. I am satisfied that the work areas have been sufficiently cleared to allow the work to be carried out safely. I also understand that this permit deals with the control of laboratory hazards alone and other permits may be required for, for example, pipework isolations or hot works.

Name of operative or engineer: *Jane Spanner*
College Staff ☒ **Dept/ Div:** *Estates*
Company ☐ **Name:**

Signature: *Jane Spanner* **Date:** *20/01/2005* **Time:** *08:30*

4. WORK COMPLETION – this must be completed by the person named in Section 3

The work described above has been completed and all personnel, materials and equipment have been withdrawn.

Signature: *Jane Spanner* **Date:** *20/01/2005* **Time:** *12:00*

5. WORK ACCEPTANCE AND PERMIT CANCELLATION – to be completed by person named in Section 2

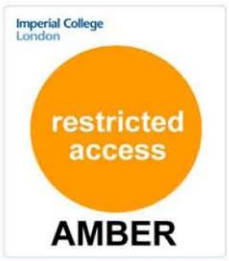
I accept that the work has been completed and that the laboratory areas affected can now be made operational. This Permit is now cancelled.

Signature: *J. Smith* **Date:** *20/01/2005* **Time:** *12.00*

Appendix G Example of completed ERP template

Imperial College London

EMERGENCY RESPONSE PLAN (ERP) AND ACCESS CONTROL PROCEDURES

Type and description of facility or area	Description of hazards within this facility or area
Chemical waste store. Denios purpose designed hazardous waste store. Blue steel one-piece walk-in unit with double door.	Mixed chemical waste including corrosive, flammable, and toxic chemicals. No radioactive materials are stored in here.
Hazard signage	**Access control status**
	

Location	Map of facility
Campus: South Kensington Building: Ayrton Road Floor: Not relevant Room no: Not relevant	

24 hour emergency contact details
John Burgess, Hazardous Waste Coordinator (x 48868, Mobile: 07711 104524, j.burgess@imperial.ac.uk) or John Luke, Safety Advisor (x49569, Mobile: 07801217762, j.luke@imperial.ac.uk).
Responsibility for management
Safety Department. Contact details as above.
Lone working
Lone working permitted. Operative to carry mobile telephone, though 'phone should be used outside store. Door to be left open whilst operative is working inside. Located in a busy central area, so alarm can be raised and assistance sought quickly in an emergency. Store is only accessible during normal working hours.
Medical emergency
Contact Security on x4444 for first aid and further medical support if necessary. Operatives using the store have no known medical conditions that put them at increased risk. Unless there has been a spillage, there will be minimal risk in Security staff entering the area to administer first aid, though ideally, an injured person requiring first aid should exit the waste store if possible.

Appendix G Example of completed ERP template (continued)

Security incident
Hazardous substances present and also the possibility of substances such as controlled drugs, drug precursors or substances subject to ATCSA. Store to remain locked and secure at all times when not in use. Any evidence of attempted unauthorised access or break-in to be reported to Security on x4444. If Security staff discover a security breach and need to investigate the store in response to evidence of a break-in they should not handle any of the materials stored within. The Safety Department should be contacted ASAP.
Preventative maintenance access procedures
None envisaged
Reactive emergency maintenance
None envisaged that requires out-of-hours action. The only service present is intrinsically safe lighting. Any repairs or replacements to be carried out on as-and-when basis either under PTW issued by the Safety Department or direct supervision by Safety Department staff. Stand-alone unit - no services present that will impact on activities in other areas.
Building Management alarms (or other alarms)

Alarm type: None	Location: N/A	Required action: N/A
Alarm type: None	Location: N/A	Required action: N/A
Alarm type: None	Location: N/A	Required action: N/A

Fire
Store benefits from fire resistant construction. Categorised as 'Zone 2' for DSEAR purposes. No extinguishers currently present - location of store in a busy area dictates that any fire could potentially cause serious problems, therefore emergency services should be immediately summoned via Security on 4444. The small size of the store means that it is virtually impossible for anyone to be trapped by a fire.
Access arrangements for cleaning and waste removal
N/A. Facility functions as a dedicated hazardous waste store. All waste movements are supervised by those responsible for managing the store.

Appendix H Access Control Designation Flowchart