Imperial College London

Health and Safety Matters

OCCUPATIONAL HEALTH & SAFETY NEWSLETTER

Issue 19
March 2010

RECTOR'S AWARD FOR EXCELLENCE IN HEALTH & SAFETY
Nominations required by 23 April
http://www3.imperial.ac.uk/safety/policies/rectorsaward

Inside this issue:

New College / NHS Trust Joint Safety Group to Form

Imperial College London and Imperial College Healthcare NHS Trust have overlapping interests and activities. Many are high risk or high profile and present significant challenges in ensuring that the work is undertaken both safely and without the risk of adverse publicity. The two entities have therefore agreed to form a Joint Safety Group. The purpose of the group is to act as a focal point for the discussion and decision making processes for any safety related matter that impinges on both the College and the Trust. The group will provide a formal forum by which College and Trust safety staff can consult each other on matter that may affect the other party.

The Joint Safety Group will consist of three members of the College Safety Department and three safety advisers representing the NHS Trust. Though the staff representing each party are already well known to each other and have liaised on safety issues over the years, the formalised arrangement will provide a more structured framework and an opportunity to meet at set intervals to discuss matters to an established agenda. It is anticipated that such issues as emergency response, clinical trials, laboratories embedded within the other parties space and transport of hazardous or sensitive materials through each parties areas will be typical agenda items. It is proposed that the group meets every two months.

Terms of Reference for the group have been drawn up. These confirm the following:

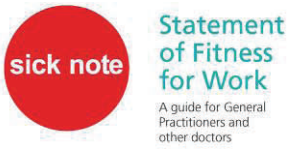
- The identity of the members comprising the group.
- The frequency of meetings.
- The threshold that constitutes a quorum.
- Confirmation of the individuals and committees to whom the minutes will be made available.
- The remit of the group with respect to: reviewing joint activities, policies and procedures, undertaking joint safety inspections, investigating incidents that impinge on both parties etc.

The following timetable for implementation has been instigated:

- Obtain approval from the College Health and Safety Consultative Committee. *Approved at the meeting held on 20 January 2010.*
- Obtain approval from the NHS Trust Health, Safety, Fire and Security Committee. *Approved.*
- Obtain approval from College Health and Safety Committee. *Approved at the meeting held on 18 February 2010.*
- Consult with the Joint Research Office. *In progress.*
- Modify the College Trust and Risk Assessment templates so that they identify more clearly when the proposed activity may impinge on the other party. *From February 2010.*
- Develop web pages (sub-pages of the College Safety Department web pages). *Action by end of March 2010.*
- Hold first Joint Safety Group Meeting. *Took place 18 February 2010.*
- Prepare a joint safety policy stating that the College and the NHS Trust (and their respective staff) will consult and respect each others concerns and gain approval from the relevant committees. *Action by end of May 2010.*
- Publicise widely. *Ongoing.*

Access this Newsletter in electronic format at:
http://www3.imperial.ac.uk/safety/otheresources/newsletter

Occupational Health Matters



Sickness certification

A new form of sickness certificate is scheduled to be introduced in April by the Department of Work and Pensions. This will replace the current Doctor's Statement used by GP's when certifying their patient as unfit to work for one week or more.

General Practitioners will be able to certify their patient as fit for some work and to advise, in general terms, on temporary restrictions in duties or hours worked to accommodate the effects of illness.

The aims of the new certification system is to allow a person to work through minor illness if an employer is able to make changes in work circumstances necessary to accommodate the effects of the illness. It also provides a means for a GP to advise an employer on adjustments that may assist the rehabilitation of their patient back into work during recovery from more serious illness.

Guidance is being prepared for managers on implementing GP's recommendations. The MRC may be producing their own guidance but the College OH Service will be happy to advise as necessary.

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Pandemic flu

The threat of a major epidemic of H1N1 influenza has receded. Indices of flu-like illnesses are falling in the UK and in most other countries to levels around seasonal norms. The National Pandemic Flu Line ceased operation on 11 February.

No cases of flu have been reported to the OH Service since late November, suggesting a low incidence and low levels of concern on the issue in College.

Faculty of Medicine staff and students involved in patient care were offered vaccination via NHS Trust OH Departments once the vaccine became available in November. The OH Service carried out its usual seasonal flu vaccination of key operational staff.

The H1N1 virus is likely to remain in circulation for several more months, with the student age group being especially susceptible. The policy of isolating unwell students living in hall for the duration of their period of infection should continue, but other measures, such as altered cleaning priorities and provision of alcohol gel at reception desks can now be relaxed.

College drug and alcohol policy

The College Alcohol Policy is under revision. The policy's scope is being extended to cover drug misuse and dependency. The main thrust of the policy is to make clear the College's position that it unacceptable to work whilst under the influence of alcohol or drugs but that the College will treat alcohol and drug dependency as medical conditions and, as far as reasonably practical, allow time and opportunity for a member of staff or student to pursue treatment for their problem.

The policy proposes that a Head of Department retains responsibility for determining whether areas or jobs within their domain should be classified as 'dry'. Staff or students working in these jobs or areas would then be prohibited from use of alcohol during their working day.

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Vaccination policy

A college policy on provision use of vaccinations is in development. This will clarify the division of responsibilities between the College OH Service and Departments in ensuring staff and students enrol for and complete vaccination courses and specify the vaccinations recommended for specific work activities. A fuller article on the policy will appear in a future edition of *Health and Safety Matters.*

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Occupational Health Service provision

Imperial College OH Service has reached an agreement with the Imperial Healthcare Trust OH Service to provide vaccinations on Trust campuses for staff who cannot travel to South Kensington for vaccinations or follow-up blood tests.

Staff wanting to complete a vaccination course at a Trust OH Clinic will first need to contact the College OH Service at South Kensington. The College Service will then arrange the appointment and pass on details to the person concerned.

Staff and students are able to seek help directly from a Trust OH Clinic for assessment and treatment of inoculation injuries. For all other OH services they should contact the College service at South Kensington.
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News for researchers working with blood products sourced from the NHS……

It has been reported that the National Health Service Blood and Transplant (NHSBT) system for processing and testing buffy packs has changed. Previously blood was donated on day zero, processed and tested overnight and was ready for pick-up at 6am the next day (day one). From January 2010, NHSBT report that blood is processed and tested during day one and is available to picked up in the evening (7pm) of the same day…...although most customers elect to collect the blood at 6am on day two.

NHSBT have advised that, due to this delay, some researchers have reported that blood collected on the morning of day two is virtually unusable because the buoyancy of granulocytes has changed, causing them to contaminate the peripheral blood mononuclear cells when the blood is separated by density centrifugation. Elutriation usually fails to enrich monocytes beyond 60% - far below the norm of 80+% - and these preparations were contaminated with dying granulocytes. They have also observed changes in assays that use lymphocytes.

The Safety Department have contacted NHSBT and we have been advised that a new product 'component donation cones' will be available in the near future. NHSBT state that existing buffy coat customers will be sent all relevant information about the component donation cones as soon as it becomes available. This component will be from a single donor and will be issued on day zero. We have been informed that the volume is only about 10-15 ml, but there are as many or more monocytes than in a buffy coat. The source of the buffy replacement product will be from known and trusted individual donors who donate blood products on a regular basis and, as such, the risk of infections such as blood borne viruses being present is small. However, anyone purchasing this product must review, and where necessary, amend associated risk assessments to reflect the fact that the blood product is no longer from a screened source. Amended risk assessments should be forwarded to the Safety Department for approval.

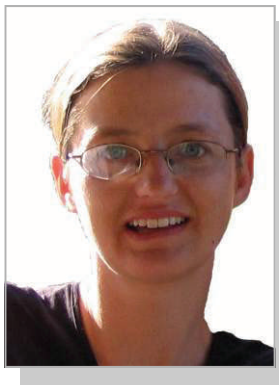
We have not been made aware of any changes to the procedures for obtaining whole blood.

The Safety Department are currently waiting for further details from NHSBT. The above information has been posted on our website and will be updated as soon as we receive further news:

http://www3.imperial.ac.uk/safety/guidanceandadvice/biosafety/safeblood

Safety Department and Occupational Health Service

Staff news….



Dr. Marian Blokpoel has joined the Safety Department as Associate Biological Safety Officer. Marian has a long association with the College, starting as a student and has worked in different departments as a post-doc. Most recently she held the position of Laboratory Manager with the Centre for Molecular Microbiology and Infection (CMMI) based in the Flowers Building at South Kensington.

Chris Allan joined the College Occupational Health Service from Chelsea and Westminster Hospital in January. He has recently completed his specialist qualification in Occupational Health Nursing. Chris has a professional interest in health surveillance and management of mental health problems in the workplace. He has already taken the opportunity to visit some departments and will continue to be out and about familiarising himself with the College environment.

Jan Lailey, who retired on 31st December, will return to work part time as the clinic nurse for well-person screening.

REVISED COLLEGE HEALTH AND SAFETY POLICY STATEMENT

The College Health and Safety Policy Statement has recently undergone some revision and has been signed by the new Acting Rector. Receipt of the new Statement has been acknowledged by Management Board.

There are some changes to the terminology i.e. the term 'university' has been replaced by 'the College' which reflects the common term of reference within Imperial. The sub-sections of paragraph 3 have also been re-ordered and there are a couple of amended points that reflect a commitment to control risks to both physical and psychological health and also to identify, assess and control the risks associated with College activities.

The new statement has been uploaded onto the Safety Department web pages to replace the previous version: http://www3.imperial.ac.uk/safety/policies/handspolicystatment

Is radiation monitoring becoming a business risk?

In 2009, just under 200 surface contamination monitors were submitted by groups working with ionising radiation to the College Radiation Protection Officers for examination and testing. The outcome of the testing was that 20% of the instruments failed and 5% were scrapped. Of the remainder that passed calibration, 40% of these were only just within acceptable radiological response limits or needed to undergo basic repairs.

In general, the majority of instruments submitted for testing are in poor condition. This is either due to continual wear and tear or they fall into poor condition when mothballed by groups who intermittently stop working with ionising radiation and leave these instruments in laboratory cupboards with old batteries in place which leak over time and render the instrument unfit for purpose.

The main problem is the age of the majority of the instruments currently in circulation. Most of them are old models that have either been made obsolete by the manufacturer or parts of the instrument assembly are not longer in supply (a full summary table detailing the status of the models currently in use in the College is available from the Safety Department). In addition, these instruments come from one single manufacturer which has now moved the manufacture of its hand-held portables outside the United Kingdom. So the supply of parts and servicing becomes a time constraint issue, with long lead times for spares and there is inevitably a wait for the instrument to return from repair.

All of this impacts on the College's statutory obligation under the *Ionising Radiations Regulations 1999* (IRR99). These Regulations require, where work is being undertaken in 'Controlled' or 'Supervised' areas, that the risks from exposure to ionising radiations are adequately monitored. This means that it is the responsibility of each Head of Department to provide their radiation users with suitable and sufficient radiation monitors and ensue that these instruments are routinely tested and maintained.

The question is now: does the College face the real risk of not being able to sustain its radiation contamination monitoring programme in the near future?

The College Radiation Protection Team have introduced an instrument scrappage recycling programme this year to assist in maintaining the aging radiation instrument fleet that is currently still in use.

Radiation Instrument Scrappage / Recycling Programme—how does it work?

Route 1

- Instruments that have been deemed beyond economical repair by the College Radiation Protection Officers during the examination and testing can be handed over by the department via the appointed Radiation Protection Supervisor.
- These instruments are then removed from the asset register by the department and official notification given to the radiation protection team via email or letter as an official record of its scrapping.
- The instrument is then broken down into its component parts and any good parts are then used to repair those instruments still in use

Route 2

- Notification will be given to department Radiation Protection Supervisors (by email) of a drop-in day and location where instruments that are intended not to be repaired by the department can be handed-over to be scrapped and used for spares.
- The department must ensure that any instrument handed over on the drop–in day is removed from their asset register and replaced.

How often will this occur?

The periodic testing and examination of surface contamination radiation monitors is a free service for Imperial College departments and is carried out by the RPO's at most campuses once a year. The notification of the drop-in day will be twice a year - once in the spring and then again in late autumn.

Locations and dates for 2010:

South Kensington	*Monday 3 May*	*14.30—15.30*
	Monday 11 October	*10.00—11.00*
St. Mary's	*Wednesday 12 May*	*14.00—15.00*
	Wednesday 20 October	*10.00—11.00*
Hammersmith	*Tuesday 4 May*	*11.30—12.30*
	Tuesday 12 October	*10.00—11.00*

Even with this programme in place and the testing service offered by the College RPO's, the responsibility for a department radiation monitors to be suitability maintained and periodically tested rests with the Head of Department.

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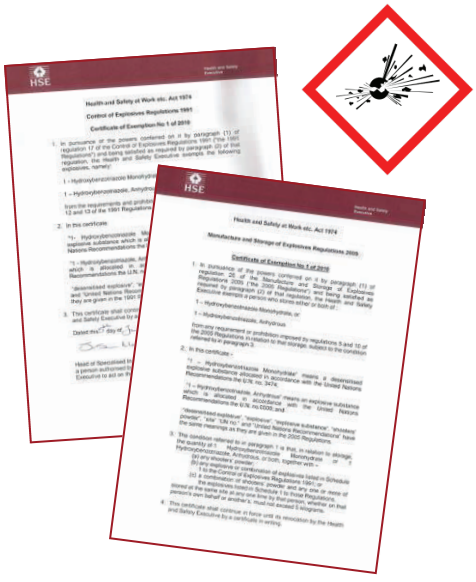
Safety Policies Update

A number of new College safety policies are currently in preparation. The current status of each policy is summarised in the table below:

Policy	Current Status	Projected Next Step
Deliberate Use of Biological Agents	• *Approved by College Health & Safety Consultative Committee (February 2010)* • *Open for consultation by College Health and Safety Committee*	• *Approval by College Health and Safety Committee at meeting scheduled for 20 May 2010*
Plant Health Controlled Material	• *Approved by College Health & Safety Consultative Committee (February 2010)* • *Open for consultation by College Health and Safety Committee*	• *Approval by College Health and Safety Committee at meeting scheduled for 20 May 2010*
Lasers	• *Safety Department internal consultation*	• *Consultation with other College safety staff and interest groups (April 2010)*
Nanoparticles	• *Safety Department internal consultation*	• *Consultation with other College safety staff and interest groups (April 2010)*
Use of material that may be infected with Biological Agents infective to humans	*In draft format*	• *Safety Department internal consultation*
Use of material that may be infected with Biological Agents infective to animals	*In draft format*	• *Safety Department internal consultation*
Local Exhaust Ventilation	*In draft format*	• *Safety Department internal consultation*
Autoclaves	*In draft format*	• *Safety Department internal consultation*

EXPLOSIVES EXEMPTIONS



The Health and Safety Executive have recently issued signed certificates exempting *1-Hydroxybenzoletriazole* (both hydrated and anhydrous forms) from certain provisions of the Control of Explosives Regulations 1991 and the Manufacture and Storage of Explosives Regulations 2005.

The move follows lobbying of the HSE by the Universities Chemical Safety Forum and the exemptions should simplify matters for researchers wishing to order this material for research purposes. It is now no longer necessary to acquire an explosives certificate and maintain detailed records nor hold a license to store explosives. This is probably not of wide interest across College, but we have received a number of enquiries in the past, so it is worth publicising.

At the time of going to print, these exemption certificates do not yet appear to be uploaded onto the HSE website. However, copies can be forwarded if necessary by the Safety Department. These can be produced in the event of purchasers encountering difficulties with suppliers when ordering.

Accidents & Near Misses

Rohini Gowtham, Accident Investigation Officer

Some Numbers for 2008 and 2009

The Safety Department have recently been collating the accident statistics for 2009. These statistics include the annual submission to the Universities safety and Health Association (USHA) for comparison with other institutions. The league tables for 2009 have not yet been compiled, but we have quoted some figures for 2008 below that outline our position for that year.

A total of 113 institutions submitted their annual accident statistics in 2008. Results are published anonymously but Imperial, Oxford and Cambridge exchanged their results for benchmarking purposes. RIDDOR reportable accidents have legal definitions, so there should be less variability when comparing the results of different institutions. Expressing the incidence rates also accounts for varying staff numbers between different institutions. Comparing the total number of accidents is more troublesome due to universities differing in the focus of their activities.

Internal Statistics for 2009:

28% Increase in the total number of accidents reported to the Safety Department in 2009, including contractor accidents (in comparison with 2008).

Percentage of accidents categorised as 'minor' requiring limited first aid. **60%**

24% Percentage of accidents categorised as 'moderate' involving attendance at Accident & Emergency, Occupational Health or the injured person's own GP.

Imperial College staff related accidents reported to the HSE under the *Reporting of Injuries, Diseases and Dangerous Occurrences Regulations* (RIDDOR) in 2008. **13**

USHA League table Statistics for 2009:

Incidence rate (rate per 1000 at risk) for RIDDOR reportable accidents to staff in 2008. **2.17**

50th Out of 113 for Imperial in the University league table based on the incident rate described above.

Out of 113 for total number of accidents reported. **39th**

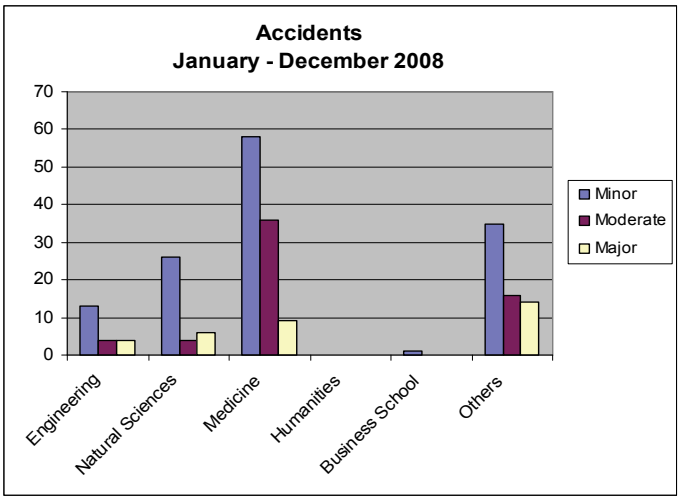
88th For RIDDOR reportable injuries involving students.

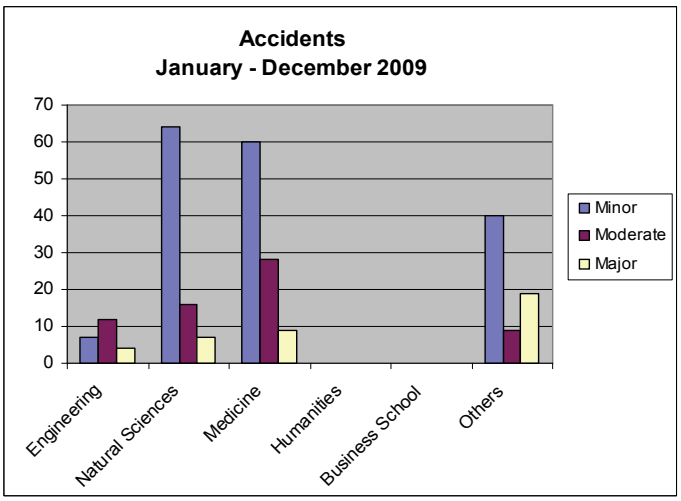
Out of 113 for total student injuries. **97th**

Accident Statistics

	Jan-Dec 2008	Jan-Dec 2009
Total accidents reported to the Safety Department (staff & students)	226	275
Total accidents reported to the Health and Safety Executive in accordance with *RIDDOR 1995*	18	20

Comparison Graphs
January to December 2008 vs. 2009





Accident rating:

Minor: No treatment required / First Aid.

Moderate: Visit to Occupational Health / GP / Health Centre or A&E.

Major: HSE reportable / Lost time (up to 3 days) / member of public taken to hospital for treatment.

FREQUENTLY ASKED QUESTION:

Is it OK to use orange lidded sharps containers to dispose of sharps waste?

This seemingly trivial question has cropped up on numerous occasions since the College adopted the colour coding scheme for clinical waste as recommended in HTM07-01 *Safe management of healthcare waste*. The matter has clearly caused some confusion amongst waste producers and waste handlers within the College, so here is an attempt to set the story straight.

As a recap, waste producers should now be aware that separate clinical waste streams exist on most College sites:

Orange stream waste: waste that can be disposed by alternative treatment (A/T) technologies such as hydroclaving (see *Health and Safety Matters*, December 2009) or microwave treatment. This comprises the bulk of waste produced in the College that is pre-treated before leaving site (e.g. autoclaved).

Yellow stream waste: waste that can only be sent for disposal by incineration e.g. tissue material.

So where does that leave sharps? Technically, there is no reason why sharps cannot be sent as orange stream waste as long as they are not contaminated with medicines or cytotoxic / cytostatic drugs. However, the NHS Trusts that the College shares premises with, have a policy of sending all sharps for incineration due to the fact that may of them are contaminated with medicines etc. As College waste is disposed via the Trust contractors on these sites, the College has adopted the same policy for consistency. In fact, the policy has been adopted across all College sites. It draws a neat distinction between bagged waste (orange stream) and waste contained in rigid containers (yellow stream). Therefore sharps bins used in the College should have yellow or white lids rather than orange lids to be properly compliant with the colour coding. All aspects of clinical waste disposal are covered in the College Healthcare Waste Code of Practice:
http://www3.imperial.ac.uk/safety/guidanceandadvice/biosafety/healthcarewaste

Continued from page 4……..

So it is important that departments have financial provision in place to sustain their radiation monitoring equipment. In addition, the College Radiation Protection Advisor (RPA) must be consulted on the suitability and selection of any new instruments that departments propose to acquire.

For further information on instrument selection please consult the College Guidance that can be found at:
Radiation Protection Manual:
http://www3.imperial.ac.uk/safety/guidanceandadvice/ionradiation

If you have any questions regarding your radiation instruments please contact the Safety Department Radiation Protection team.

Ross Morgan, College Radiation Protection Officer

…..and continuing the ionising radiation theme:

Changes to College Radiation Protection Guidance

Since 2004 there has been a College radiation protection manual consisting of over 40 guidance documents. The manual is divided into sections by subject and may be found on the Safety Department web pages at:
http://www3.imperial.ac.uk/safety/guidanceandadvice/ionradiation

As with all Safety Department Codes of Practice and guidance, the documentation interprets the requirements of national and international legislation. The manual is therefore an important element of compliance with legislation and restriction of exposure. All radiation workers should at the very least be aware of where to find it and should read any sections relevant to their work. It is also important that safety officers, safety managers and radiation protection supervisors are aware of its existence and are able to direct radiation workers to where the information may be found.

Many of the sections in the manual have recently been updated and others are due to be updated in due course. New sections have been added and some of these reflect recent changes in legislation. It is therefore a good time for those already familiar with the manual and for anyone else involved with ionising radiation work who was not previously aware of its existence to follow the link above and consult any sections that may be relevant.

Brian Robertson, College Radiation Protection Manager

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If you have any comments or suggestions for inclusion in future Newsletters please contact the editor:

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Training

Eric Miranda, Learning Development Consultant

You may be aware of the First Aid courses available at the College, First Aid at Work Qualification (3/4 days) and the Emergency First Aid at Work (1 day). First Aiders provide valuable first response and offer life-saving skills until medical professionals arrive. This emergency treatment is vital to prevent the patient's condition worsening, to reduce the effects of any injury and promote recovery.

We also offer Fieldwork First Aid (2 days) and Personal First Aid (1 day) for those expedition leaders and team members working offsite where there is limited access to emergency medical services, undertaking research in remote locations, tropical countries, challenging environments. In offsite locations you distance yourself from medical professionals and instead of providing first aid for a few minutes you may have to provide it for hours.

The first problem is the time factor which makes the job of First Aider working offsite more difficult. A typical example is a badly broken leg, with reduced circulation below the point of injury. In workplace first aid you would simply be advised to keep it still and call an ambulance. However, in the outdoors it may be necessary to straighten and splint the limb to regain circulation. This is an advanced skill and one not normally performed until the patient reaches theatre - however on a remote trip this knowledge might just save the patient's leg for them! The First Aider may also need to prepare the casualty for evacuation to a safer, more accessible area.

The second problem is the potential extremes of climate found in the outdoors. The potentially harsh conditions can provide a threat to strong healthy people, let alone someone who is injured or ill. Consider the added difficulties of keeping a casualty warm on a snowy mountain in a winter gale. The First Aider must also be able to recognise the early signs of heat stress on summer field trips included students who may be "hung over" and dehydrated.

The problems of providing first aid in an extreme environment are made worse by the lack of equipment available. A First Aider will only have available the materials which can be carried or which can be improvised. What should therefore be carried needs careful consideration and is based on intimate knowledge of the area to be visited and its potential hazards.

Imperial College has been running fieldwork courses for three years led by Stuart Marshall of Marlin Training Ltd. The course provides First Aiders participants with those basic and advanced first aid skills needed for fieldwork and the confidence to use those skills effectively in an outdoor environment.

Not an accident involving a clinical waste bag, but how to protect a casualty in the big outdoors……..

training schedule & events

Below is a selection of forthcoming courses. The complete list for this term is too comprehensive to include here—please consult the training programme link for the entire range: https://www3.imperial.ac.uk/staffdevelopment/safety/index.htm

March 2010		April 2010	
Emergency First Aid at Work (*Hammersmith*)	9th	Principles of Radiation Protection *(Hammersmith)*	14th
CIEH Level 2 Award (*South Kensington*)	16th	Responsibilities of Academic Supervisors *(South Kensington)*	14th
Introduction to Laser Safety (*South Kensington*)	17th	First Aid at Work Requalification *(South Kensington)*	19th & 20th
Biological Foundation Safety Training (*Charing Cross*)	24th	Gas Safety *(South Kensington)*	21st
Fire Prevention and Fire Safety *(Silwood Park)*	24th	First Aid at Work *(South Kensington)*	26th to 29th

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