

**Health & Safety Induction**

**To be issued to all new staff working in laboratories**, including:

Postgraduates; Undergraduate Project Students, Postgraduate Students, Technicians, Postdocs, Research Assistants and Visiting Researchers.

**To the new person:** This package is designed to ensure that you are properly informed about Safety in the School of Cardiovascular & Metabolic Health (SCMH), and that you are correctly registered according to the regulations applying to the hazards you may be exposed to.

**To supervisors:** Please note that **every** new worker should receive full instruction on Safety.

It is **your responsibility** to make sure that this happens.

### SAFETY INFORMATION FOR NEW PERSONNEL

Whether you are a newcomer to research laboratories or an experienced research worker, you will need to make a considerable effort to get to know the local safety procedures and to make sure that you comply with statutory and other requirements. Safety is important! Failure to work safely and according to the guidelines in our Safety Codes may lead to dangerous situations not only to yourself, but also to those about you.

To get started, please read and follow carefully the following guidelines.

## Safe working - getting started

* You may not start work until you have received formal **SAFETY INSTRUCTION -** usually from your supervisor**\**local safety coordinator
* **Everyone** should have read and understood the SCMH Safety Policy - this is available from the local Safely Officers as well as the [SCMH Health and Safety website](https://www.gla.ac.uk/schools/cardiovascularmetabolic/healthsafety/). There is an acknowledgement of “read and understood” that all personnel must submit before starting work.
* Before starting bench-work you **MUST** have read and signed all relevant **COSHH** (Control of Substances Hazardous to Health) and general risk assessments. These are available on Microsoft Teams folder or stored and kept in the laboratory. **Ask your supervisor for the relevant forms and inform local safety coordinator to add you to the SCMH Health and Safety Teams folder. \*\* Undergraduates and MSc students must sign the hard copy as they will not have access to the Teams folder\*\***
* Appropriate training in procedures using hazardous materials or methods must be provided by a suitably experienced member of staff and signed-off by your supervisor prior to performing procedures on your own.
* You **are prohibited from** starting work with radioactivity before you have been registered, completed the training run by the Radiation Protection Service and received a dosimeter. Contact Ruth Macleod John McAbney ([John.McAbney@glasgow.ac.uk](mailto:John.McAbney@glasgow.ac.uk) or 330-8102)
* **Health, Safety and Wellbeing** have an e-induction programme you are required to undertake. It can be accessed at: <http://www.gla.ac.uk/services/health/>
* **On Completion of Induction Checklist Please Sign Off and email to (please keep a copy for your self and line manager/supervisor): Katie.Sutherland@glasgow.ac.uk**

**If ever in doubt about safety - ASK!** SCMH staffare there to help; H&S Committee members and other useful contacts are listed on the SCMH H&S web site.

Note that you may be required to complete other Safety induction and specific training before starting certain work.

**School of Cardiovascular and Metabolic Health**

**Health & Safety Induction Checklist**

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| Name: |  | Job Title/  Position: |  |
| Location: |  | Start date: |  |
| Listed below is a checklist of Health & Safety matters, mostly general but some applicable only to work in laboratory areas. Initial induction should be covered (as applicable) within **one** week of starting. However, emergency procedures should be covered on the first day. When induction health & safety training is completed, the relevant boxes should be ticked. For items not covered, comments should be recorded giving reasons and date for completion. The new starter and supervisor providing the induction should both sign the form. The new person should keep a copy and a copy should be emailed to School Administration. | | | |

**General Health and Safety**

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| --- | --- | --- | --- | --- | --- |
| **1.** | **HS Policy & Information** | **Yes** | **No** | **NA** | **Comments** |
| 1.1 | Has the School’s Health & Safety Policy been explained to the new starter and have they been directed to the H&S website.  [*https://www.gla.ac.uk/schools/cardiovascularmetabolic/healthsafety/*](https://www.gla.ac.uk/schools/cardiovascularmetabolic/healthsafety/) |  |  |  |  |
| 1.2 | Have the policies been highlighted that are specific to the location they will be based in. |  |  |  |  |
| 1.3 | Has the new start assimilated and understood the contents, with resolution of any language / cultural issues. |  |  |  |  |
| 1.4 | Have they been told the names of local safety officers? |  |  |  |  |
| 1.5 | Have they been made aware of employee’s own health & safety responsibilities? |  |  |  |  |
| 1.6 | Has the new start been directed towards other sources of safety advice and information, e.g. Health & Wellbeing, SEPS, etc. (if appropriate)? |  |  |  |  |
| 1.7 | Has the new start been directed to the Health & Well Being “E-Induction Course”? |  |  |  |  |
| 1.8 | Has the new start been added as a member of the SCMH Health and safety Team (microsoft teams). |  |  |  | Relevant to only staff and Postgrads (PhD and MRes) |
| 1.9 | Explain the concept behind Safety Training Record and that this must be completed. |  |  |  | Relevant to only staff and Postgrads (PhD and MRes) |
| 1.10 | As the new start been shown all the building facilities. Toilets, Meeting rooms, Kitchen Facilities, Tea Room, Freezer Rooms, Liquid Nitrogen Rooms. |  |  |  |  |
| 1.11 | Please be sensitive about the use of social media when promoting your work. |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **2.** | **Fire Safety / Emergency Evacuation** | **Yes** | **No** | | **NA** | | **Comments** |
| 2.1 | Has the new start completed the online fire safety training available from SEPs |  |  | |  | |  |
| 2.2 | Has the new start been informed of actions to take in the event of a fire; including triggering fire alarms, calling fire brigade, accessing fire exits, evacuation routes and assembly points ? |  |  | |  | |  |
| 2.3 | Location and identification of fire extinguishers; their use and self-assessment of ability to tackle fire. |  |  | |  | |  |
| 2.4 | Day and time for local fire alarm test. |  |  | |  | |  |
| 2.5 | If new start has a disability, is a Personal Emergency Evacuation Plan (PEEP) required ? |  |  | |  | |  |
| **3.** | **Accidents, Hazard reporting & First-Aid** | **Yes** | **No** | **NA** | | **Comments** | |
| 3.1 | Have you explained the incident / accident reporting procedure and how to report a hazard ? This includes near misses |  |  |  | |  | |
| 3.2 | Location of local eye wash stations and first-aid boxes, identify local first-aiders. |  |  |  | |  | |
| **4.** | **Out of hours working and prohibitions** | **Yes** | **No** | **NA** | | **Comments** | |
| 4.1 | Have you explained the local / University policy on working outside normal working hours ?  All new staff/ students (3 month training period) not allowed in labs after 5:30pm unless supervised. |  |  |  | | **No** UG/MSc PGT allowed to work alone in building after 5:30pm | |
| 4.2 | Explained local area out of hours security, access and egress procedures ? |  |  |  | |  | |
| 4.3 | Where appropriate, have you explained which work activities they are not permitted to undertake, equipment they are not allowed to use, substances they must not handle and any restricted locations ? |  |  |  | |  | |
| 4.4 | Policy and regulations for equipment left running overnight and permit / signage system. |  |  |  | |  | |
| 4.5 | Be made aware of Safezone App. |  |  |  | | For lone working, sharing your location with security personnel | |
| **5.** | **Use of Computers** | **Yes** | **No** | **NA** | | **Comments** | |
| 5.1 | If the work of a new start involves a significant amount of Display Screen Equipment (DSE) use, have they been given a access to DSE Powerpoint Presentaion? and made aware of moodle course for the safe use of Display Screen Equipment. |  |  |  | |  | |
| 5.2 | Shown the procedure for carrying out a workplace assessment for a user ? |  |  |  | |  | |
| 5.3 | Explained arrangements for eye tests ? |  |  |  | |  | |
| **6.** | **Electrical Equipment** | **Yes** | **No** | **NA** | | **Comments** | |
| 6.1 | Checks required before using electrical equipment. |  |  |  | |  | |
| 6.2 | Action to follow if faults found. |  |  |  | |  | |
| 6.3 | Procedures when new equipment is obtained – PAT test and asset register. |  |  |  | |  | |
| 6.4 | Desirability of switching off and unplugging electrical equipment when not in use. |  |  |  | |  | |
| 6.5 | The use of headphones is strictly prohibited in laboratories. |  |  |  | |  | |
| **7.** | **Emergency Shut off procedures** | **Yes** | **No** | **NA** | | **Comments** | |
| 7.1 | Location of notices for shut off procedures. & actions to take in case of emergency. |  |  |  | |  | |
| 7.2 | Familiarisation of notices to each lab area entered. |  |  |  | |  | |
| **8.** | **General Housekeeping** | **Yes** | **No** | **NA** | | **Comments** | |
| 8.1 | Maintaining tidy work areas. |  |  |  | |  | |
| 8.2 | Maintaining clear access in corridors, keeping fire-doors closed. |  |  |  | |  | |
| 8.3 | Avoiding slip, trips and fall type accidents. |  |  |  | |  | |
| 8.4 | Safe storage of items. |  |  |  | |  | |
| 8.5 | Manual handling techniques – training available. |  |  |  | |  | |
| 8.6 | Risk assessment and safe systems of work specific to work of new start. |  |  |  | |  | |
| 8.7 | Local rules. |  |  |  | |  | |

**Laboratory-Specific Health and Safety**

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| --- | --- | --- | --- | --- | --- | --- |
| **A.** | | **Personal Protective Equipment (PPE)** | **Yes** | **No** | **NA** | **Comments** |
| A.1 | | Lab coats provided – where and what **not** to wear |  |  |  |  |
| A.2 | | Laundry arrangements for labcoats |  |  |  |  |
| A.3 | | Action in the event of clothing being contaminated. |  |  |  |  |
| A.4 | | Do not use gloved hands to open doors when working/walking between different lab-areas |  |  |  |  |
| A.4 | | Availability of disposable gloves (different types)  & etiquette regarding doors, phones, lifts etc.  Safety glasses, Face masks and other types of PPE are also available |  |  |  |  |
| **B.** | | **COSHH & RA** | **Yes** | **No** | **NA** | **Comments** |
| B.1 | | COSHH & Risk Assessments – working with hazardous substances – biological & chemical.  The location and procedures for COSHH & RA forms (hardcopy and Microsoft Teams).  General requirement for Risk Assessment in the workplace.  Accessing forms and MSDS |  |  |  |  |
| B.2 | | Use of equipment is prohibited unless properly trained |  |  |  |  |
| **C.** | | **Storage and handling** | **Yes** | **No** | **NA** | **Comments** |
| C.1 | | Storage and handling of flammables, toxics, corrosives, gas cylinders, liquid nitrogen – specific arrangements and training for handling materials or objects which are dangerous or difficult. |  |  |  |  |
| C.2 | | Procedure for accessing Liquid Nitrogen (No lone working, appropriate PPE to be worn, use of personal Oxygen monitor) |  |  |  | No out of hours access |
| C.3 | | Handling and storage of biological samples. |  |  |  |  |
| C.4 | | Be aware that storage glass bottles and heavy items on shelves above shoulder height is prohibited. |  |  |  |  |
| C.5 | | Be aware when receiving ordered reagents and chemicals they must be dated and properly stored |  |  |  |  |
| C.6 | | Certain reagents and chemicals (acids, bases, solvents, etc). should not be stored together |  |  |  |  |
| **D.** | | **Immunisation & Occupational Health** | **Yes** | **No** | **NA** | **Comments** |
| D.1 | | Explained policy for immunisation for Hep B. |  |  |  |  |
| D.2 | | Issued Hep B Immunisation form (if required). |  |  |  |  |
| D.3 | | Explain Health Surveillance procedure and when risk assessment and OHU appointment is required (Respiratory sensitization , dermatitis, due to e.g. constant use of gloves or constant handwashing). |  |  |  |  |
| **E.** | | **Radiation (if appropriate)** | **Yes** | **No** | **NA** | **Comments** |
| E.1 | | Working with Radiation local rules. |  |  |  |  |
| E.2 | | Completed dosimeter paperwork. |  |  |  |  |
| E.3 | | Access to advice on radiological hazards, i.e. the radiological protection local supervisor and SEPS advisor. |  |  |  |  |
| **F.** | | **Spillages** | **Yes** | **No** | **NA** | **Comments** |
| F.1 | | Action in the event of spillages – biological and chemical. |  |  |  |  |
| F.2 | | Location of Chemical Spill Kits |  |  |  |  |
| **G.** | | **Disposal Routes** | **Yes** | **No** | **NA** | **Comments** |
| G.1 | | Waste / disposal system – coloured bags; sharps; glass; |  |  |  |  |
| G.2 | | Disposal of biological material – samples; plates etc. |  |  |  |  |
| G.3 | | Disposal of solvent waste |  |  |  |  |
| G.4 | | Disposal of other chemicals |  |  |  |  |
| **H.** | | **Genetic Modification (if appropriate)** | **Yes** | **No** | **NA** | **Comments** |
| H.1 | | Local GM Safety Officers. |  |  |  |  |
| H.2 | | Working with GMOs – policies and procedures, including accessing forms to register and gain approval for projects. |  |  |  |  |
| H.3 | | Disposal of waste |  |  |  |  |
| I. | Other Hazards | | **Yes** | **No** | **NA** | Comments |
| I.1 | Particular arrangements for specific equipment relevant to post | |  |  |  |  |
| I.2 | Any other matters | |  |  |  |  |

Assessment of training needs

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| --- |
| List here any specific mandatory Health & Safety training needs identified e.g. lasers, GMOs, gas cylinders (including any critical timetables for attendance) and any additional H&S information required by / for new starter: |

**STAFF / STUDENT:**

I agree I have received and understood the above safety induction and been given all relevant information.

|  |  |
| --- | --- |
| Name of staff / student: |  |
| Signature: |  |
| Date: |  |

**Supervisor\Line Manager**

I certify that the attention of the new staff/student named here has been drawn to the SCMH safety code and to the points listed above.

|  |  |
| --- | --- |
| Name of staff / student: |  |
| Supervisor's name: |  |
| Job Title: |  |
| Supervisor's signature: |  |
| Date: |  |