



HEALTH & SAFETY POLICY

I have received, read and understood a copy of the above Safety Policy.
(The regulations contained in this document supersede all previous Institute regulations regarding Health & Safety.)

Signed:	_____	Date:	_____
Print Name:	_____	Matric No/ Staff No	_____
Location:	_____	PGR	<input type="checkbox"/>
Supervisor/ Line Manager:	_____	PGT/UG	<input type="checkbox"/>
		Staff	<input type="checkbox"/>

PGR Students - Please sign and send top sheet (post or scan) to Ms Dorothy Ronney, Institute of Cardiovascular and Medical Sciences, BHF Glasgow Cardiovascular Research Centre, 126 University Pl, Glasgow, G12 8TA: Dorothy.Ronney@glasgow.ac.uk

PGT & UG Students - Please sign and send top sheet (post or scan) to Ms Amina Choudary, Institute of Cardiovascular and Medical Sciences, BHF Glasgow Cardiovascular Research Centre, 126 University Pl, Glasgow, G12 8TA: Amina.Choudary@glasgow.ac.uk

Staff: - Please sign and send top sheet (post or scan) to Ms Amina Choudary, Institute of Cardiovascular and Medical Sciences, BHF Glasgow Cardiovascular Research Centre, 126 University Pl, Glasgow, G12 8TA: Amina.Choudary@glasgow.ac.uk



University
of Glasgow | Institute of Cardiovascular
& Medical Sciences

HEALTH & SAFETY POLICY

INSTITUTE of CARDIOVASCULAR & MEDICAL SCIENCES
(BHF GLASGOW CARDIOVASCULAR RESEARCH CENTRE; WLC COMPLEX (SIR JAMES BLACK,
WOLFSON LINK & DAVIDSON BUILDINGS); QUEEN ELIZABETH UNIVERSITY HOSPITAL &
ROYAL INFIRMARY)

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CARDIOVASCULAR & MEDICAL SCIENCES

University of Glasgow

Safety Policy Statement

The Institute of Cardiovascular and Medical Sciences recognises work in the Institute can, on occasions, be hazardous. It is the philosophy and belief of this Institute that accidents are preventable and that the maintenance of good health and safety standards will, in addition to meeting legal requirements, improve overall performance and cost effectiveness. Successful management of health and safety at work can only be effectively achieved through the concerted effort and active participation of every staff member in fulfilling their duties as required by law. Its success relies entirely on the contribution each person makes towards health and safety. The Director of the Institute is responsible for putting in place effective arrangements for ensuring the health, safety and welfare at work for everyone working within Institute property. This applies to all staff, students and visitors within the Institute of Cardiovascular and Medical Sciences and from other Institutes, Colleges and Institutions.

Each level of management within the Institute, from top to bottom, is accountable to its respective superior and at the same time responsible for its subordinates on safety matters.

Supervisors should lead, motivate and encourage their staff to report on hazards and to discuss all matters relating to safety.

The Safety Policy is made and safety performance monitored by the Institute Executive under the guidance and advice of the Institute Health & Safety Committee comprising staff representatives from various locations, plus interested and associated groups.

The Institute recognises that safety requirements which are required by law set only a minimum standard. It is also recognised that safety standards are dynamic in nature and the Institute underlines the importance of its commitment by constantly reviewing its own safety standards. As far as conditions and resources permit, the Institute is committed to continual and progressive improvement in safety standards.

All staff in the Institute are required to observe the health and safety rules and standards and adhere to the Institute Health & Safety Mission Statement (see Section 2). Deliberate deviation from the established rules and standards may result in disciplinary action.

The Cardiovascular & Medical Sciences Health & Safety Committee will review this Policy Statement at least annually.

Prof. Christian Delles,
Interim Director,
Institute of Cardiovascular & Medical Sciences,
September 2021

1. INTRODUCTION

Cardiovascular & Medical Sciences (ICAMS) is a Research Institute within the College of Medicine, Veterinary and Life Sciences of the University of Glasgow. Parts of the Institute are based in accommodation belonging to the University of Glasgow, namely the BHF Glasgow Cardiovascular Research Centre (GCRC) in University Avenue and Wolfson Link Complex (WLC) (comprising Sir James Black, Wolfson Link & Davidson Buildings) within the main University campus. ICAMS also occupies accommodation on NHS sites (currently represented by NHS Greater Glasgow & Clyde Health Board) in both Glasgow Royal Infirmary (GRI - specifically the New Lister Building) and Queen Elizabeth University Hospital. Therefore, ICAMS also subscribes to the Health & Safety policy of the NHS Greater Glasgow & Clyde Health Board.

Under the Health & Safety at Work Act, 1974, the University and its employees have legal obligations to ensure that all work is carried out according to safe working practices. In particular the act requires:

“Clause 7 – It shall be the duty of every employee while at work to take all reasonable care for the health and safety of himself / herself and of other persons who may be affected by his / her acts or omissions at work.”

And

“ As regards any duty or requirement imposed by his employer or any other persons by or under any of the relevant statutory provisions, to co-operate with him so far as necessary to enable that duty or requirement to be performed or complied with.”

Clause 8 – No person shall intentionally or recklessly interfere with or misuse anything provided in the interest of health, safety or welfare in pursuance of any of the relevant statutory provisions”

The University’s policy in relation to health & safety at work is set out in its written statement of policy, a copy of which is available from the Institute’s Safety Committee. The present document is designed to complement and amplify this by describing the organisation for safety in Cardiovascular & Medical Sciences and by indicating potential hazards in the Institute and the precautions needed to combat them.

2. HEALTH AND SAFETY MISSION STATEMENT

The Institute of Cardiovascular & Medical Sciences is committed to maintaining and enhancing the Health and Safety of all staff, students, patients and visitors to benefit individual well-being and accomplish high standards of medical care, research and teaching within the Institute.

This will be achieved by:

- Promotion of Health & Safety practices within the Institute.
- Effective assessment and management of risks.
- Provision of Health and Safety Training with an opportunity for all to participate.
- Establishment of a Health and Safety Committee, with designated Safety Co-ordinators at each site.
- Adherence to Statutory Regulations, policies determined by the University of Glasgow and NHS and the development of Institute guidelines.

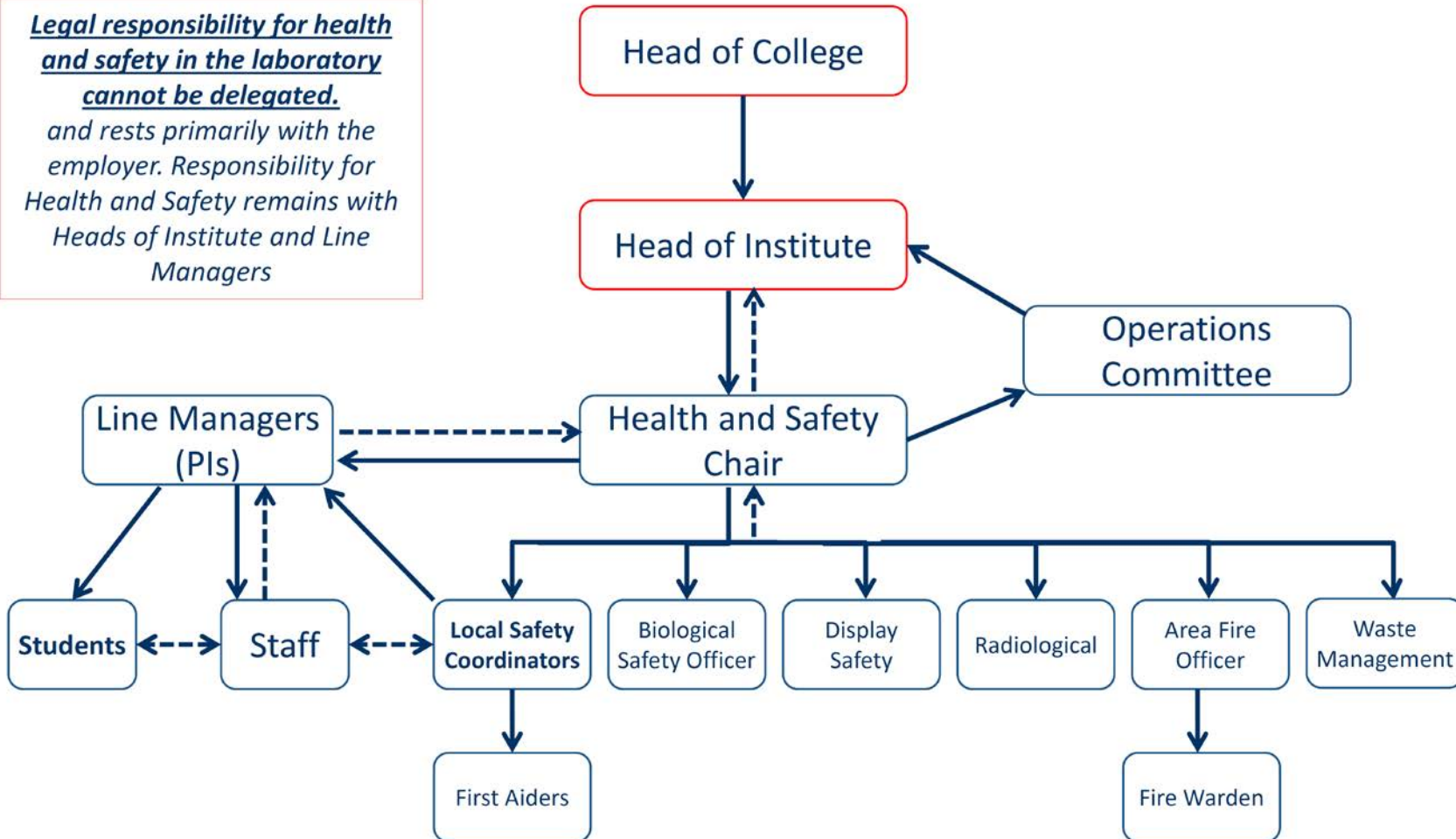
If any member of staff has any suggestions or comments regarding the above statement please address contributions to Dr. Wai Kwong Lee (Convenor of the Institute’s Health & Safety Committee) by emailing cams-ins-safety@glasgow.ac.uk or Wai.Lee@glasgow.ac.uk or 330-2393)

3. SAFETY ORGANISATION, ROLES & RESPONSIBILITIES

The University’s responsibility for safety in the Institute is discharged by the Interim Director of Institute, Professor Christian Delles, who is directly responsible to Head of College, MLVS. Professor Delles and the Institute Executive delegate authority to the ICAMS Health & Safety Committee who in turn expect all staff to care for the health and safety of fellow staff, students, patients and visitors under their immediate supervision.

Health And Safety Management (Roles and Responsibilities)

Legal responsibility for health and safety in the laboratory cannot be delegated. and rests primarily with the employer. Responsibility for Health and Safety remains with Heads of Institute and Line Managers



Local Safety Coordinators can play an important role in the day-to-day running of the laboratory. Safety officers need to be known by all members of staff and regular visitors to the laboratory.

Health And Safety Management (Roles and Responsibilities)

Line Managers (PIs)

- Knows and understands own responsibilities for managing health and safety and ensures that the University's Health, Safety and Wellbeing Policy is brought to the attention of all employees within their area of control
- Understands risks associated with the work they are responsible for and what they need to do to control them.
- Knows what they need to do to ensure the competence and capability of employees in their area of responsibility
- Knows what they need to do to monitor health and safety in their area of responsibility.
- Provides support to employees with long term sickness absences to return to work.
- Ensure that staff, students and visitors are provided with adequate information about the risks they may face and about any action they need to take to prevent injury or ill health

Local Safety Coordinator

- Ensure that all new staff receive a safety induction into the unit and are made aware of all precautions and procedures applicable to the job and of emergency procedures.
- Ensure that systems are in place to record, investigate and report on any accidents and incidents that occur.
- Develop systems for periodic inspection and auditing of local safety arrangements and for submission of reports to appropriate local managers and local safety committees.
- Develop and establish suitable local emergency procedures.
- Establish procedures to periodically inspect all equipment managed by the unit and to maintain this in a safe condition, whether by in-house staff or by specialist contractor and to identify and report safety defects in the workplace environment to Estates and Buildings.

Health And Safety committee

- Identify the legal requirements and University or College policy affecting the work of the unit and assist in devising suitable management systems to enable compliance with these.
- Develop communication strategies to ensure that all staff clearly understand their individual safety responsibilities both as individuals and with regard to any supervisory or managerial role that they may hold
- Prepare documented procedures and arrangements for the management of health and safety and environmental protection within the unit.
- Develop systems and arrangements to ensure that risk assessments are conducted, recorded and reviewed and that any risks so identified are adequately controlled.

4. HEALTH & SAFETY COMMITTEE

The Head of Institute is assisted in the discharge of safety responsibilities by the Health & Safety Committee, whose responsibility is to advise on general safety matters in the Institute, in conjunction with the University Safety Committee and the Safety Committee of the NHS Greater Glasgow & Clyde Health Board. Institute H&S Meetings are held at regular intervals and the minutes are freely available from members of the H&S committee. The current membership of the Health & Safety Committee (with nominated Deputies) is as follows:

Convenor	Wai Kwong Lee	330 2393	Wai.Lee@glasgow.ac.uk
Deputy	David Hughes	330 6132	David.Hughes@glasgow.ac.uk
Both can be contacted regarding H&S specific issues at			
Local Safety Co-ordinators:			
BHF-GCRC	Elaine Butler (L2)	330 4344	Elaine.Butler@glasgow.ac.uk
	Wendy Beattie (L3)	330 8015	Wendy.Beattie@glasgow.ac.uk
	Nicola Britton (L4)	330 2393	Nicola.Britton@glasgow.ac.uk
Davidson / West Medical Building	David Hughes	330 6132	David.Hughes@glasgow.ac.uk
	Michelle Lee (DB)		Michelle.lee@glasgow.ac.uk
	Elaine Brown (SJB)	330 7744	Elaine.Brown@glasgow.ac.uk
	Gillian Lappin (SGDB)	330-6388	Gillian.Lappin@glasgow.ac.uk
GRI – New Lister Building	Ann Harold	201 8510	Ann.Harold@glasgow.ac.uk
Joseph Black Building	Sheon Samji	330 2627	Sheon.Samji@glasgow.ac.uk
QEUH	Philip Stewart	354 9112	Philip.Stewart@glasgow.ac.uk
Institute Safety Co-ordinators:			
Biological	Scott MacKenzie	330 2669	Scott.Mackenzie@glasgow.ac.uk
Genetic Modification Safety	Fiona Leiper	330 2757	Fiona.Leiper@glasgow.ac.uk
Wire Myography (Core)	Laura Haddow	330 4483	Laura.Haddow@glasgow.ac.uk
Clinical Research Facility	Katriona Brooksbank	330 2418	Katriona.Brooksbank@glasgow.ac.uk
Display Users	Jillian Blair	330 4962	Jillian.Blair@glasgow.ac.uk
	Elaine Friel		Elaine.Friel@glasgow.ac.uk
Radiation Protection	John McAbney	330 4483	John.McAbney@glasgow.ac.uk

Within each site, Safety Co-ordinators have been appointed to administrate, monitor and advise on all aspects of Health and Safety. They will designate and oversee individuals responsible for local issues such as Fire Safety, First-aid, Radiation Protection etc. The contact details of these individuals at each site can be found in the Contacts Section in Appendix 1 on pages [31-36](#).

Whilst the above named have specific responsibilities regarding Health & Safety, as a member of the Institute, you are required to:

Familiarise yourself with issues of safety that directly affect your own activities.

Behave in a responsible and collegiate manner where your work activities impinge upon others.

Co-operate with guidelines and requests from staff whose job function relates to issues of safety.

5. COMMUNICATION OF SAFETY INFORMATION

- Information and advice on specific hazards will be passed on and general information made available through line management and the persons listed as having special responsibilities in certain areas. Appropriate safety information is displayed on notice boards and can be obtained from any member of the H&S Committee.
- The most “essential” documents are available on the ICAMS public website.
- Institute health and safety information and forms will be available to *staff* on SharePoint (GUID required).
- Any urgent H&S information will be emailed round Institute staff and students.

6. LOCAL TRAINING

It is one of the duties of supervisory staff (academic, laboratory or administrative) ensure that all users are responsible for receiving adequate training and instruction in safety procedures appropriate for their work, which includes the completion of Control of Substances Hazardous to Health (COSHH) and Risk Assessment Forms. :

- All newly recruited staff/students must complete the following steps as illustrated in the figure, where appropriate.
- On being recruited – Health, Safety & Wellbeing have an e-induction overview accessible at <http://www.gla.ac.uk/services/health/e-inductionoverview/> which all new staff are required to complete – including the associated quiz. There is also Safety Induction plans available from local Safety Co-ordinators available for all new staff / visitors working in laboratories.
- And on being exposed to new or increased risks because of changes in responsibilities, work practices, the introduction of new equipment or new policies and procedures, a new risk assessment must be completed.

Completion of the Online Fire Safety is mandatory and should be completed every three years. A register of completion will be maintained by the local Safety Co-ordinators.



There are also regular courses held by SEPS e.g. on gas cylinder safety, disposal of chemical and hazardous waste etc. see their site for more details (<http://www.gla.ac.uk/services/seps/trainingandresources/>), or contact your local Safety Co-ordinator.

7. HEALTH SURVEILLANCE

The Occupational Health Unit carries out health surveillance, to look for early signs of work-related, ill-health in employees exposed to certain health risks. There are certain procedures in place to achieve this and it is required by law where there is a detectable disease associated with that type of work.

These procedures include:

Simple methods, such as looking for skin damage on hands from using certain chemicals

Technical checks on employees, such as hearing or lung-function tests

More involved medical examinations perhaps where radiation or vibrating equipment is used

The first stage of any health surveillance programme is to identify potential hazards to health via a risk assessment. If the hazard cannot be completely controlled or eliminated, further steps need to be taken to protect employee health - one of which is to consider health surveillance.

Line managers should use the **Health Surveillance Request Form** to seek surveillance for employees who are exposed to certain risks prior to commencing research/work with potentially hazardous chemicals or materials,

human or primate blood, tissue or infected organisms, Ionising Radiation, Genetically Modified Organisms, or Lead. All completed forms should be returned to Occupational Health Unit, 63 Oakfield Avenue, Glasgow, G12 8LP or electronically to ohu@admin.gla.ac.uk

Employees who are *exposed* to respiratory sensitisers during the course of their work attend Occupational Health for health surveillance. Before attending for your first appointment, you will be asked to complete the **Respiratory Sensitiser Questionnaire**

The links below will lead you to additional information for employees/employers regarding Health Surveillance.

[Health Surveillance Why we do this](#)

[Understanding Health Surveillance at Work \(HSE\)](#)

8. SAFETY INSPECTIONS

All staff are expected to be on the lookout for actual or potential hazards at all times and to report them to the appropriate Safety Co-ordinator or member of the H&S Committee; or take appropriate action themselves if safe to do so. In addition, there will be a system of regular inspections by the members of the Safety Committee. Items for action will have a named actionee and a target date for completion. Forms for carrying out Safety walk-rounds can be obtained from members of the Safety Committee.

9. COSHH & RISK ASSESSMENTS

Before any new work begins using chemical or biological fluids /agents, assessment of all chemical and biological risks involved requires to be performed (under the terms of the Control of Substances Hazardous to Health (COSHH)), using the standard University forms which can be downloaded from the SEPS website – <http://www.gla.ac.uk/services/seps/forms/>

Risk assessment of any equipment, or specific tasks/activities associated with the new work is also required. Many Risk Assessments are already compiled with copies available. If a new item/ task / activity is introduced to processes, a Risk Assessment must be documented prior to the equipment/ task / activity being put into operation. A template can be downloaded from the SEPS site:

General Risk Assessment – <http://www.gla.ac.uk/services/seps/az/risk%20assessment/>

It is the responsibility of Principal Investigators (PIs) and section supervisors (as appropriate), to ensure that COSHH and Risk Assessments are compiled (electronically) before work begins. On completion, any senior member of the research group using the COSHH / RA can verify the assessments. PIs / group supervisors will review the assessments annually and each COSHH form will be re-signed, during October each year, by staff using the procedures and assays outlined in each COSHH/RA form. A list of active COSHH and Risk Assessments in each lab and an acknowledgement that they have been updated must be sent to Dr. Wai Kwong Lee, by the end of October each year. It is the responsibility of all new staff and students to read, understand and sign the relevant COSHH forms prior to starting practical work. Copies of COSHH forms will be held at the work-bench and also filed in an appropriate office / document cupboard. If advice or assistance in compiling COSHH and Risk Assessments is required please contact the local Safety Co-ordinator or your Supervisor/PI.

Work involving Genetic Modification is governed by separate rules. Please see section 11.

10. RADIOLOGICAL PROTECTION

Radioactive materials are used in a small number of designated areas within the Institute. The Radiation Protection supervisors named in Appendix 1 of this document are responsible for recording the types, amounts and disposal of all radioactive sources held in their sectors. When working in areas containing radioactive material, all staff **must** wear personal radiation dosimeters. Local Rules governing the safe handling and disposal of Radionuclides are posted in all Supervised and Controlled Radiation areas. It is the duty of all staff working with Radionuclides to familiarise themselves with these Local Rules (including the action to be taken in the event of a spillage or accident involving radioactive material.). For further information and advice contact the Institute Radiation Protection Co-ordinator – John.McAbney@glasgow.ac.uk or 330-8102 More information on the University's Radiation Protection Service can be found at:

<http://www.gla.ac.uk/services/radiationprotection/>

11. GENETIC MODIFICATION

GM Definition

The introduction of new combinations of heritable material by the insertion of nucleic acid molecules, produced by whatever means outside the cell, into any virus, bacterial plasmid or other vector system so as to allow their incorporation into a host organism in which they do not naturally occur but in which they are capable of continued propagation.

Legal requirement

Experiments in which Genetic Manipulation is involved are subject to legislation enforced by the Health and Safety Executive and SEERAD/DEFRA and guidance endorsed by the Scientific Advisory Committee on Genetic Modification (SACGM). A useful reference tool is the "The SACGM Compendium of guidance". The guidance represents what is considered to be good practice. If you follow this guidance you will normally be doing enough to comply with the law. The compendium can be accessed at:

<http://www.hse.gov.uk/biosafety/gmo/acgm/acgmcomp/index.htm>

Applications to work in CMVLS using GM material

The introduction of new vectors or recombinant DNA samples within CMVLS requires the prior agreement of one of the listed GM-Biological Safety Officer (GMBSO):-

For staff in BHF-GCRC, all hospital-based staff, and all those previously affiliated with the Faculty of Medicine, and McGregor building, initial enquiries should be sent to:-

Dr Stuart A Nicklin (GM committee 318)
Institute of Cardiovascular and Medical Sciences
telephone: 0141 330 2521
email: Stuart.Nicklin@glasgow.ac.uk

For staff in the Bower, Boyd Orr, Davidson, Sir Graham Davies buildings (except ex-Medical Faculty, see above), Graham Kerr, Joseph Black, Lab of Human Anatomy, Wolfson Link and Sir James Black, and all staff previously affiliated with the Faculty of Biomedical and Life Sciences, or who are not affiliated with the College of MVLS, initial enquiries should be sent to:-

Dr Joel J Milner (GM committee 37)
Life Sciences Biomolecular Science
telephone: 0141 330 5836
email: Joel.Milner@glasgow.ac.uk

GM Risk Assessments forms and advice can be accessed at –

<http://www.gla.ac.uk/services/seps/az/biological%20safety/gmriskassessment/>

All projects involving genetic modification can only be commenced once a Risk Assessment has been prepared and assessed. Please contact the ICAMS Biological Safety Co-ordinator (Tony Workman) for copies of the forms. Completed forms should be passed to him; they will then be forwarded to the College of Medicine/NHS North Glasgow Genetic Modification Safety Committee (GM Committee 318) for consideration and approval. Once approved a copy of the Risk Assessment must be filed within the lab in which the work will take place. If the work ultimately involves animals a copy must also be filed in the Animal Unit. A fee is payable for registering new Class II and above projects with the HSE. The College of Medicine/NHS North Glasgow Genetic Modification Safety Committee meet quarterly, however further meetings can be called for the consideration of urgent projects. The Principal Investigator for each project is ultimately responsible for the correct training of staff and students in biological safety and Genetic Modification rules, however the Biological Safety Co-ordinator is available for advice and assistance and should be contacted in the light of any queries in the first instance. Local rules for biological safety are available in all tissue culture suites. All post-graduate students should attend the ‘Safety in Handling Genetically Modified Organisms’ course. Details are available on SEPs website

Biological and Genetic Modification Safety

Updates to existing Projects and staff changes

When submitting any updates and changes to the GM-BSO, always quote the reference given by the Committee on your approved Risk Assessment.

Minor updates to existing projects can be submitted to Dr. Stuart Nicklin or Dr. Joel Milner, as appropriate. New staff and students working on the existing projects must read and sign the Risk Assessment Signatures page as required. Please notify Dr. Stuart Nicklin / Dr. Joel Milner of staff changes when additions are made; or when the project is in abeyance or ceased.

Further information is available from HSE Genetically Modified Organisms –

<http://www.hse.gov.uk/biosafety/gmo/index.htm>

12. WOMEN OF CHILDBEARING AGE

All proposed work activities are assessed to establish if they present an additional risk to women of childbearing age and new or expectant mothers. Any such risk is identified within the COSHH assessment, or the relevant codes of practice. Adherence to the Institute's local rules for work with ionising radiation will ensure that exposure of these staff to ionising radiation will be below their prescribed dose limits.

Note 1: To assist the University in discharging its responsibilities towards the health and safety of a pregnant employee and her unborn child, written notification to the relevant Director of Institute and Safety Co-ordinator must be made at an early stage in the pregnancy. This is to ensure that a risk assessment can be carried out as soon as possible. New or expectant mothers will have a risk assessment of their work carried out as early as possible. This should be monitored and reviewed at different stages of pregnancy (including pre-pregnancy); also if a mother has given birth in past 6 months, or is breast feeding.

Note 2: The law requires that an employee takes a minimum of 2 weeks maternity leave following the birth of the baby.

Further information can be found at:

<http://www.gla.ac.uk/services/seps/az/newandexpectantmothers/>

HSE site – <http://www.hse.gov.uk/mothers/index.htm>

13. DISABILITIES

The University of Glasgow is committed to disability equality and ensuring all staff, students and visitors have a positive experience of the work, learning, teaching and research environment. There is a dedicated Disability Service (<http://www.gla.ac.uk/services/disability/>) within the University, which offers advice and support for those with chronic and temporary disabilities. Within the Institute, staff or students with a disability (whether chronic or temporary) that is likely to impact on either their own or colleague's health and safety should liaise with the Local Safety Co-coordinators and administrative staff, to discuss modifications to working practices, or arrangements for emergency evacuation that require to be put in place (refer to PEEPS section). Staff hosting visitors / meetings, where those with a disability may be present, should also be aware of the need for forethought regarding possible emergency evacuation, if the need arises.

The University's Safety and Environmental Protection Services team are highlighting a major overhaul of the arrangements for helping people with disabilities to be able to leave buildings quickly and safely in emergencies. This is in line with the latest legislation and the University's own policies. Refuge areas are beginning to be identified in many of the Universities buildings. These are intended as areas suitable for disabled people to shelter temporarily on upper floors while they await assistance. These areas, typically stair landings, are marked as fire refuges. In the event of a fire alarm or other circumstance that prevents exit by lift, those with a disability that prevents them leaving the building unaided should proceed to the closest Refuge Area.

Two-way communications systems are installed in some Refuge Areas to allow users to communicate directly with Central Services staff. There is a rolling programme to provide more two-way communication links. Where there are no 'phone links at the moment, people are advised to use mobile 'phones to contact Central Services (on 4444). Anyone who requires assisted evacuation is advised to carry a charged mobile phone and to ensure that the emergency number below is programmed into the phone memory.

Fire Wardens and other staff provide a further route for emergency communications.

Emergency Number: 0141 330 4444

You can read the full guidance notes here:

<http://www.gla.ac.uk/services/seps/az/firesafety/assistedevacuation/#d.en.279378>

14. ELECTRICAL EQUIPMENT

There are no strict rules for the frequency of Portable Appliance Testing (PAT) testing, however the GU SEPS site does provide guidance on testing intervals for various classes of equipment depending on perceived risk, i.e. priority should be given to certain types of equipment whose usage and operational environment mean that they are more likely to give rise to electrical danger. Within this general framework, most equipment in laboratories or workshops should be tested at intervals of between 12 and 24 months. Most equipment in offices, libraries and similar accommodation should be tested every 24 - 36 months. Any defects or doubts concerning the safety of the equipment should be immediately brought to the attention of the Local Safety Co-ordinator.

GCRC & WLC:

A commercial company will check electrical equipment for electrical safety at annual intervals.

GRI & QEUEH:

The NHS is responsible for PAT tests. The GRI and QEUEH Estates offices hold the PAT test records.

Disposal of Electrical Equipment

Following the introduction of the Waste Electrical & Electronic Equipment Regulations 2006 (known as the WEEE Regulations) any equipment covered by the Regulations **must not** enter the normal waste stream (e.g. bins and skips for general waste). Basically, everything electrical must be disposed of according to the WEEE regulations. Further information on this is available at:

<http://www.gla.ac.uk/services/seps/waste/electricelectronicsequipment/>

In the first instance contact the local Safety Co-ordinator for advice on disposal.

15. DISPLAY SCREEN EQUIPMENT

Regulations regarding the use of display screen equipment (DSE) (i.e. "Any alphanumeric or graphical screen regardless of the display process involved") will only apply to those personnel who "...habitually use display screen equipment as a significant part of their normal work". This is most likely to apply to administrative and secretarial staff but may also include academic and support staff that use word processors for the majority of their working day.

All new employees who use display screen equipment are required to have an eye test, which can be arranged through the university health service (330 7171). This is also available to existing users. All DSE users are encouraged to undergo a DSE eye test at regular intervals.

It is a requirement of the regulations that all existing workstations are assessed to identify any risks to health and safety which may arise from their use. Self- assessment of workstations can be carried out as necessary. Copies of the regulations along with the workstation assessment guide and checklist can be obtained at

<http://www.gla.ac.uk/services/seps/az/computers/>

Please contact the DSE Safety Co-ordinator or the local Safety Co-ordinator, if further information is required.

16. OUT OF HOURS WORKING

The Institute management recognises that the nature of scientific research often means members of staff and students may wish to work outwith normal core working hours of 8.00am – 6:00pm Monday - Friday in both the laboratory and/or offices. In order to minimise risks, it is required that no individual should ever undertake out of hours work for which they are untrained, nor should they undertake any work where there is a significant safety issue or where a risk assessment states that two people are required to carry out the work. With these provisions, staff or students requiring to work out of hours may do so subject to having completed authorised access to the location; that a risk assessment has been carried out and that individuals have appropriate training in the activities they are undertaking.

Anyone (new staff/postgraduates) who wishes to work out of hours (after 5:30pm) must undergo appropriate training and have written approval from their Supervisor/PI. Normally there will be a lead in time of 3months before this will happen. Any new staff/postgraduates who wish to work after 5:30pm must be supervised.

Never undertake potentially hazardous work whilst alone in the laboratory, e.g. accessing the liquid Nitrogen storage facility, working with solvents or radioactivity.

Further information and guidelines can be found in the Health & Well-being's "**Lone Working Procedure**" – & "**Lone Study Procedure**".

Staff Guests – whilst it is not Institute policy to encourage staff bringing “guests” into work with them when working out of hours, it is recognised that this may happen from time to time. However any guests must be accounted for with security and/or in the logbook. It is also essential that the presence of any guests be confined to office or staff-room areas. On no account should they be present in laboratory areas.

GCRC:

There is a sign-in book on arrival. Please state your name and area in which you will be working (this book can be found at the security guard's desk at the reception). Staff should also SIGN OUT when leaving the building. In addition, if you are alone in the building you should phone University security on 4282 when you enter the building and again when you leave. Please also note that any visitors brought into the building during out of hours should also be registered in the same manner.

WLC :

Staff, staying in the WLC, for whatever reason, after 5.30 p.m. on weekdays or any time at weekends must sign the Late Working Book, located opposite the janitor's box near the front entrance of the Wolfson Link Building. Undergraduate students must not carry out lab work unsupervised and must not work in laboratories after 5.30 p.m. or at weekends unless they have permission to do so from a member of academic staff. The person giving permission is responsible for the supervision of the student and must arrange appropriate supervision. Do not leave building exit routes unlocked after working hours.

QEUH (Laboratory Building & Teaching & Learning Centre):

Laboratory Building:

The routine day in Biochemistry (within which ICAMS labs are situated) is from 8.45 am to 5 pm, Saturday and Sundays a rota covers 8.45 am to 12.30 at the QEUH. A shift system is in place to cover all other hours to provide a 24hours service.

Teaching & Learning Centre:

Core hours for the building are 0800 to 2000 hrs Monday to Friday. Out of Hours procedure shall apply from 2000 to 0800 hrs Monday to Friday, all day Saturday, all day Sunday and all public holidays.

Any staff entering the building out of core hours or should enter via the hospital link bridge or disabled access door at the front building entrance, and register their access by scanning their ID badge at one of the designated input readers. Staff already present in the building and remaining beyond core hours shall scan their ID badge at 2000 hrs at those input readers or at the closest input reader to their point of work. This will provide the Scottish Fire & Rescue Service with information on the last known location of any missing member of staff, particularly as staff moving between access controlled zones will register on the system at their last scanned location.

It is important when moving between floors that all staff register their location by swiping their ID card at the nearest controlled access reader. To help facilitate this it is recommended that all out of hours movement between floors are made via the main atrium lifts or stairs, ensuring that last known location is registered as each staff member enters via the controlled access points from the Atrium. When exiting the building out with core hours staff members should scan their ID badge at the designated exit reader to register their egress from the building. There is no requirement to scan out after 0800 hrs.

For any security issues arising call the emergency hotline number on 2222 (or for an urgent security issue contact the Police directly on 999).

GRI – follow local rules for office-based staff.

17. RESEARCH FURTH of GLASGOW

(I.) Undertaking research or fieldwork away from the University.

Staff and graduate students are expected to be based at the University throughout their employment/studies unless there is a specific arrangement for locating at a recognised institution or local NHS hospital. In cases where the location is not University premises or a recognised Institution (current list is given at <https://www.gla.ac.uk/research/ourresearchenvironment/prs/mobilityandcollaborationopportunities/researchfurthofglasgow/>), permission should be sought in advance. It is the PI's responsibility to arrange permission and completion of the relevant paperwork and any other requirements prior to arranging student trips away from the University.

Staff or students working offsite are considered to be representatives of the University for the duration of the trip, including during leisure or 'off-duty' periods. Their actions throughout this time will represent not only their own personal values but also those of the University of Glasgow. This Code of Conduct defines the expected standards of behaviour that all staff and students should conform to during any off-site trip

All staff and students should:

1. Obey the reasonable instructions of their group leader.
2. If visiting another organisation, comply with the rules of that organisation.
3. If travelling abroad comply with all laws of the country visited.
4. Comply with health and safety arrangements for the work.
5. Not behave in a manner which could damage the reputation of the University during work and leisure time.
6. Respect the social and cultural beliefs of your hosts. This includes modesty in your dress if required by local customs or religious observance.
7. If drinking alcohol, do so responsibly and within the boundaries of local laws and customs.
8. Keep the fieldwork leader or deputies informed of your whereabouts and intended time of return, if going out independently, including during personal time.
9. Report any accidents, near misses, or incidents of ill health, no matter how minor, to the fieldwork leader/deputies

Special permission must also be obtained in advance for any work undertaken away from the usual location. This applies whether the remote work is in another academic or research institution, or industrial laboratory, where supervision levels and facilities and safety are at least equivalent to those here; or whether you are doing fieldwork. Permission is not withheld unreasonably but the Institute and University has to ensure that students are appropriately supervised, are safe, and that facilities are adequate. Fieldwork encompasses virtually any work that is done away from the institution, including travel in higher risk situations. The University requires that fieldwork be risk-assessed and managed in a similar manner to other activities. The Universities Safety & Health Association (USHA) in association with the Universities & Colleges Employers Association (UCEA) has published guidelines endorsed by the MVLS Graduate School to assist in the assessment procedure. The forms and checklists within the document are available in Word format either from the **USHA website** (registration is required) or from

<http://www.gla.ac.uk/services/seps/az/fieldwork/>

Rules on use of University vehicles that may be relevant to work away from the University can be accessed from the University website.

(II.) Duty of Care to staff\students travelling overseas on University Business

Duty of care is not simply an ethical concern but a legal obligation which is embedded in workers compensation laws in the UK. Protecting the University's employees also helps to protect against the University's business, financial and reputational risks.

Employees who travel overseas often find themselves in unfamiliar environments and situations, subject to increased risks, and less prepared to handle these situations than if they were in their home country.

It is the responsibility of the line manager (or other identified member of staff) to ensure that the employee is as well prepared for the trip as possible. This can include many factors such as –

- Ensuring that the employee is fully briefed on the area he/she will be visiting
- Ensuring that an adequate risk assessment has been carried out by the employee and that action has been clearly identified which will help to reduce, as far as possible, any perceived risks
- Ensuring that travel insurance has been organised well in advance of the trip
- Ensuring that the employee is keeping up-to-date with the latest information on their destination by accessing the Foreign and Commonwealth Office (FCO) website - <https://www.gov.uk/foreign-travel-advice>

Travel insurance is one means of helping to alleviate problems that can arise on trips overseas but this does not prevent the incident happening in the first place – it merely helps to address the consequences. The University's travel insurance policy does provide additional facilities that can help an individual both prepare for a journey and assist them during the trip. Staff/Students need to register at the travel insurer's website (<https://travelguard.secure.force.com/TravelAssist/TASiteLogin?PL=Chartis%20UK>) before they can access various services that are available. The policy number will be required to register - this will be shown on the cover note issued after the application for travel insurance has been submitted. It can also be obtained by contacting the Insurance Section. The following is a list of some services available via the travel insurance policy:

Before travelling: Security Articles, Country reports, Daily News Reports

Services when travelling: Emergency Medical and travel assistance, SMS and email security alerts

Anytime services: Medical Provider finder, Medical second opinion

Links to the University's insurance-related requirements concerning travel,

<https://www.gla.ac.uk/myglasgow/insurance/>

If you require advice from within the Institute regarding graduate students carrying out research furth of Glasgow, please contact wai.lee@glasgow.ac.uk.

NB. These policies and guidelines also apply to staff working away.

18. OCCUPATIONAL HEALTH / IMMUNISATION

Hepatitis B immunisation - all staff and students planning to work in any laboratory that uses human derived material (blood samples, urine samples, primary cells in tissue culture, etc.) are strongly advised to undergo a Hep B immunisation programme. The need for this should be determined by risk assessment and approved by their Line Manager/Supervisor. Only once the full course of immunisation has been received can work with biological samples proceed outside a Class II microbiological safety cabinet.

Immunisation can be arranged through The University Health Service at 63 Oakfield Avenue, telephone 330-7171 to arrange an appointment.

The “rapid” course of immunisation consists of three injections, the cost of which (approx. £125) will usually be met either by the research group concerned or Institute, on a case-by-case basis. Booster injections are no longer routinely offered, however if an individual is uncertain as to their immunisation status, contact the Occupational Health Unit.

Anyone working with human biological samples, who declines immunisation is required to sign a declaration to this effect.

19. ANIMALS

No work can be performed using live animals until the experimenter obtains Home Office approval for the work and a licence to conduct the work. Biological Services provides accredited Home Office training courses twice a year for prospective new Personal and Project Licence Holders. This training is mandatory for all new training applicants and the Home Office will not accept licence applications submitted without certificated proof of course attendance. It is imperative that the Licence holder then rigorously follows the guidelines contained in the Licence and does not exceed any limitations of the licence. Consultation with your Supervisor/PI is essential regarding potential animal work.

*****NB. It is obligatory that the Occupational Health Unit is contacted prior to staff or students undertaking any animal work, so personnel can undergo health screening and surveillance. Please contact your Supervisor or Line Manager– they will pass on your details to OHU with completed Health Surveillance Forms*****

20. REGISTRATION of PATHOGENS & TOXINS

The University Health, Safety and Wellbeing Committee has approved a policy and process for registering and recording the possession or introduction into the University of 'high hazard' pathogens and toxins (not all biological hazards - only a very small proportion). The purpose of this process is to ensure that both the relevant management units and SEPS have key information on highly hazardous materials to enable us to carry out our safety management duties.

All the details, the form and guidance on what needs to be registered are available at:

<http://www.gla.ac.uk/services/seps/az/biological%20safety/pathogensandtoxins/>

A copy of all completed forms etc. should be returned to your local Safety Co-ordinator. The Safety Committee keeps a full list and record of the pathogens and toxins on behalf of the Institute. PIs / Lab Managers should also notify using the form when materials are finally destroyed so we can maintain current records.

This list is the only route by which SEPS has the information to notify the local police anti-terrorism security office of the university's holdings of designated pathogens and toxins as we are legally required to do under terrorism law.

21. ACCIDENT REPORTING AND INVESTIGATION

*****All work-related accidents and “near miss” incidents, however minor, must be reported to SEPS and the relevant line manager and recorded using the University’s “Injury or Dangerous Occurrence Report” form, as soon as possible after the event. *****

If possible, serious incidents should be reported by telephone in the first instance. **Telephone 0141 330 5532** (or see **Contacts** page.)

Incident Reports can be submitted to SEPS using the Incident Report form. Please make sure that you have also reported the incident within your own department either to your line manager or via the local reporting system. Report using a printable form - **Incident Report Form** (Microsoft Word) or **Incident Report Webform**

So that legal time limits for reporting relevant incidents to the Health and Safety Executive are not exceeded, don't delay sending an initial report while waiting for additional information or investigating the incident - that information can be supplied later when it is available.

Guidelines on Accident & Incident reporting can be accessed at:

<https://www.gla.ac.uk/myglasgow/seps/reportanincident/>

GRI & QEUH:

As well as the University's "Injury or Dangerous Occurrence Report" form, staff either employed by the NHS, or GU staff based in NHS property are also obliged to inform NHS Health & Safety. Therefore, report all incidents / accidents and known or suspected work or environmental-related ill health to the appropriate NHS manager for your area.

The relevant line manager will investigate all accidents and near misses. They may call upon the assistance of the University Safety Office personnel and / or NHS Health & Safety personnel, if appropriate, to establish the root causes and introduce management action to prevent a recurrence. If necessary, discussions will take place at H&S Committee level and a report prepared for the Head of Institute and pertinent authorities as appropriate.

If you have been injured at work, witnessed a dangerous occurrence, or your doctor has certified that you have a work-related reportable disease, you must inform the Convenor of the H&S Committee and the Institute Administrator. The appropriate PI, University Safety Office, NHS Health & Safety Co-ordinator and where appropriate other interested parties (e.g. the Safety Section of the MRC) will then be informed.

22. MANAGING STRESS in the WORKPLACE

The Health & Safety Executive (HSE) defines Work-related Stress as "*the adverse reaction people have to excessive pressures or other types of demand placed on them*" (see Section4). However, HSE also makes a clear distinction between stress and pressure, recognising that pressure does not always lead to stress and is often motivational, providing the positive drive to achieve objectives at work.

HSE emphasises the importance of good management practice in reducing stress in the workplace. It identifies the key 6 factors influencing stress levels as being:

Demands · Support
Control · Change
Role · Relationships

Further information can be found in HSE publication HSG218 Managing the causes of Work-related Stress - <https://www.hseni.gov.uk/sites/hseni.gov.uk/files/managing-the-causes-of-work-related-stress-hsg218.pdf>

The University has reflected this in its Policy for Managing Stress in the Workplace which can be found at <http://www.gla.ac.uk/services/health/policyformanagingstressintheworkplace/>

The policy outlines the University's commitment to the management of workplace stress, as well as identifying the responsibilities of employees and managers in implementing the policy.

There are a range of support services available to help employees who feel they are maybe becoming stressed by their work. This includes the independent Employee Assistance Programme, delivered by the company PPC. This service includes 24-hour access to telephone counselling, access to short term face-to-face counselling with experienced, qualified counsellors in the local area, as well as access to a wealth of self-help information sheets on a huge range of topics, available through PPC's on-line services. Details on accessing all these free services are available at: <http://www.gla.ac.uk/services/health/staffcounselling/>

23. POTENTIAL HAZARDS

Below, an attempt is made to give a broad review of the potential hazards found in the Institute and an indication of the appropriate safety precautions and procedures to be adhered to. It is the responsibility of PIs to ensure that staff and students in their research group adhere to all health & safety regulations.

a) General

Medical conditions (e.g. allergies, diabetes, colour blindness, epilepsy, immunosuppression, etc.) should be made known to your supervisor, prior to working in a laboratory. Also refer to 12 regarding Pregnancy.

Safety Guidelines - Always follow safety guidelines, given by members of staff with specific responsibilities for safety within the Institute and staff who are familiar with certain procedures.

Manual Handling - Never attempt to lift or move anything that feels too heavy for you, or is an awkward shape. If in doubt request assistance and/or use a mechanical aid i.e. trolley, skates etc. Information on assessments, training courses can be found at

<http://www.gla.ac.uk/services/seps/az/manualhandling/>

Smoking is banned in both University and NHS buildings and grounds.

Do not obstruct corridors, access to fire-exits, fire-appliances or to first-aid boxes. Do not jam open fire doors.

b) Laboratory

Laboratory coats must be worn in laboratories at all times. They must be properly fastened. However, laboratory clothing must **not** be worn in **non**-laboratory areas. An exception to this is the transporting of biological or hazardous materials between labs - either between floors within a building, or between buildings. Open-toed **shoes/sandals** must **not** be worn in laboratories.

Gloves - When gloves are required, ensure that they have the appropriate chemical resistance for the substances being used. Gloves should be removed when not actually handling hazardous materials so that any contamination is not spread around thereby exposing others to risk. Contaminated gloves should always be disposed of in the appropriate approved container. Always cover any unhealed cuts with a waterproof plaster. Gloves should be removed before answering any phone in the lab area. They should not generally be worn outside the lab areas. An exception to this is the transporting of biological or hazardous materials requiring gloved hands; in this case a second person should accompany you to open doors etc., or always remove one glove in corridors or at exit/entry doors.

Allergies, which can be serious, can occur as a result of wearing latex gloves (e.g. Micro-Touch). Anyone experiencing an immediate reaction (skin reddening, blisters, wheezing/coughing) or a delayed skin reaction should notify their supervisor immediately. Anyone working with animals should also contact Occupational Health Unit so they can undergo health screening for potential allergy development.

Hands must be thoroughly washed after dealing with biological fluids / tissue, biologically hazardous and radioactive materials; also when leaving the laboratory. (Appropriate skin disinfectants are available for use following needle stick injuries or similar incidents).

Eye protection - Safety glasses or a face shield must be worn when necessary (e.g. pouring hazardous liquids, opening ampoules etc). Contact lenses are not advised (vapours can concentrate in solution under them and they may be difficult to remove in the event of a splash to the eye). Persons proposing to wear them should inform their supervisor so that satisfactory precautions can be devised.

Long Hair must be securely tied back or covered to avoid contact with chemicals or equipment.

Consumption of Food and Drink is strictly forbidden, as is storing food and drink, and applying cosmetics in laboratory areas. No food, drink or feeding utensils shall at any time be taken into laboratories or placed in any of the refrigerators, deep freezers, cold-rooms or ovens. (There are designated fridges and microwaves for food in staff common rooms on all sites.) The only exception to the above is if the consumption is an integral part of a clinical trial e.g. in Sports & Exercise Science.

Mobile Phones / earphones in lab areas - The following instructions apply to mobile phones, personal stereos, mp3 players and i-pods etc. and have been developed as a result of recommendations received from HSE following an inspection of research laboratories. Personal mobile phones and music players must not be brought into or used in laboratory areas where one or more of the following criteria apply:

- There is a high risk of them becoming contaminated with any of the hazardous substances being handled in the laboratory. This may then result in exposure of the individual via ingestion or skin contact. Contamination can also be carried out of the laboratory thus putting others at risk.
- They are cause of distraction, which is a potential hazard when carrying out safety critical procedures.
- Where it is important to be aware of what is going on in the work area. Wearing ear phones interferes with the ability to hear alarms and to conduct normal communication. This can produce a sense of isolation from the environment and could be considered a serious risk to safety.
- Mobile phone signals may interfere with sensitive scientific equipment
- There is a potential for creating an ignition source in areas where flammable vapours are present.

Where it is essential that you can be contacted, please refer potential callers to the laboratory phone. When answering the laboratory phone always remove your gloves.

The use of larger items with loudspeakers such as radios, CD players etc. is subject to the same considerations as above. In particular:

- Where there is a risk of contamination with hazardous substances the device must be considered as dedicated laboratory equipment and must not be subsequently removed to offices or other 'clean' areas.
- It must also undergo portable appliance electrical safety testing in accordance with University policy.
- It must be used with due consideration given to the wishes of others and turned off when the room is unoccupied.
- Lone working - it is acknowledged that there may be situations, such as lone working, where it is important to ensure the availability of a mobile phone as a control measure. Where this is the case the individual should keep the phone on their person, under their lab coat and only make calls in an emergency or accept calls as part of the agreed contact arrangement.

Domestic pets and children are not allowed in the laboratory areas. The only exception to "children" being work experience students - who must be supervised at all times.

Maintenance engineers and occasional visitors must be accompanied by a member of staff, who must ensure that they maintain the desired standards of hygiene and use the relevant protective equipment. Senior personnel responsible for the equipment or sectors in which the engineers will be working should be notified.

Use of Equipment – before using any piece of equipment you must be aware of any specific risks detailed in the Risk Assessment and the safety precautions that require to be taken.

Unattended Equipment - Equipment left running out of normal working hours should bear a notice giving emergency contact details for user and shutdown procedure to be used in an emergency.

Turn off gas, water, electricity and other supplies when not required.

Sinks may be required in an emergency, therefore should be kept clear.

Spillages

All spillage of blood or of radioactive substances must be wiped up immediately in accordance with the local rules on dealing with spillages, posted in the laboratories. Any spillage of hazardous or potentially hazardous material on bench tops or floors must be wiped up immediately, as per guidelines. This is the duty of the person responsible for dealing with the sample / radioactivity / chemical in question.

Guidelines can be found at

Dealing with Chemical Spillages - http://www.gla.ac.uk/media/media_173309_en.pdf

Transport of materials

Do not transport any potentially hazardous materials such as chemicals, solvents, radioactivity, or large volumes of cultures in private vehicles or public transport. The University provides vehicles for this purpose.

Within or between buildings, hazardous or potentially hazardous materials should be transported using appropriate containers e.g. Winchester carriers; or placed in a secondary container that is sealable and "unbreakable" to prevent /minimise any leakage or contamination of the surrounding area, or loss of precious material in the event of an accident. Also please ensure that the carrier is properly marked and labelled as to the type of materials contained i.e. Category B, or exempt and also that contact details are readily available in the event of an incident.

Every attempt must be made to avoid transporting any potentially hazardous material through public or patient areas particularly on hospital sites.

If there is a requirement for the transportation of potentially hazardous materials (e.g. biological samples or chemicals (including pharmaceutical compounds) outwith the local environs, ensure that you as the sender, adhere to all necessary legislative requirements regarding transport, packaging and documentation for the appropriate means of transport. If in doubt, consult professional carriers for advice.

Guidelines for the transport of biological hazards can be accessed at:

<http://www.gla.ac.uk/services/seps/az/biological%20safety/transport%20of%20biological%20hazards/>

Waste Disposal – Laboratory waste must be disposed of in an appropriate and safe manner. It is particularly important that cleaning staff are not exposed to hazardous waste. All “sharps” (pipette tips, glass, scalpels, needles etc.) must be disposed of in appropriate sharps containers. Do not overfill containers. All chemical and biological waste must be disposed of as per instructions in the relevant COSHH form.

Further information regarding University policy and guidelines for waste disposal can be found at:

<http://www.gla.ac.uk/services/seps/waste/#d.en.38775>

c) Biological

All members of staff dealing with biological fluids / tissue (blood, serum, plasma, faeces, urine, tissue) must use engineering controls and PPE (protective clothing, gloves and mask) as appropriate to the work they are undertaking. Any breaks in skin i.e. cuts and grazes should be covered, with for example, elastoplasts.

Due to the number of biological samples received in Institute laboratories, all members of staff are reminded that strict precautions must be taken to minimise the risk of infection with pathogens. These agents can enter by mouth, eyes, or through cuts and scratches in the skin.

Periodically the NHS issue posters giving guidance on for example the Management of Needle-stick Injuries and a Check-sheet for HIV Infection. These are generally displayed in sample reception areas within the laboratories. Whilst every precaution is taken to avoid introducing pathogenic specimens into the laboratory we can never be certain, therefore the best policy is to treat all biological samples as if they are health hazards. Biological fluids / tissue not required must be re-sealed at once and disposed of in the appropriate container.

In order to limit the risks of infection, the following will be enforced-All injuries, however minor, occurring in ICAMS must be reported at once, by completing an accident form downloaded from <https://www.gla.ac.uk/myglasgow/seps/reportanincident/> or local Safety Co-ordinator.

As well as the University's "Injury or Dangerous Occurrence Report" form, staff either employed by the NHS, or GU staff based in NHS property are also obliged to inform NHS Health & Safety. Therefore, report all incidents / accidents and known or suspected work or environmental-related ill health to the appropriate NHS manager for your area.

See Section 21 for full details.

d) Needle Stick Injuries

Within the laboratory, needles are only permitted to be used for procedures as detailed in the COSHH and Risk Assessment forms.

In the event of a needle-stick/sharp induced injury the follow procedures must be followed-

Immediately stop the work you are performing.

Encourage bleeding of puncture wound by gentle squeezing.

Never suck the area.

Wash the affected area with soap and clean, warm running water or a skin disinfectant, if appropriate.

Do not scrub.

Treat mucosal surfaces, mouth and conjunctiva of the eyes, by rinsing with clean, warm running water or sterile saline.

Do not rub or abrade the site.

Do not swallow liquid used for rinsing the affected site.

Dry and protect the injury site with appropriate dressings.

See HSE Sharps injuries – Further information:

<http://www.hse.gov.uk/healthservices/needlesticks/resources.htm>

Blood-borne viruses in the workplace: Guidance for employers and employees -

<http://www.hse.gov.uk/pubns/indg342.htm>

Example procedures for cleaning and disposal of body fluid spillages and sharps in public areas of the University can be found at:

http://www.gla.ac.uk/media/media_285022_en.pdf

e) Reporting and follow-up of needle-stick/sharp induced injury:

Report any incident to Supervisor / Manager or appropriate Administrator.

take further action if appropriate, ideally immediately where pathogens or hazardous chemicals may have been introduced into the body or have contaminated the wound.

For GU employees –

If a GU employee, or student undertaking a University course, you *must* make an appointment at Occupational Health to ensure treatment, counselling and if appropriate a disease prevention strategy can be instituted.

Appropriate follow-up if necessary can be carried out by the University Medical Officer, (or your personal General Practitioner).

Report using a printable form - **Incident Report Form** (Microsoft Word) and submitted to SEPs

Guidelines on Accident & Incident reporting can be accessed at:

<https://www.gla.ac.uk/myglasgow/seps/reportanincident/>

For NHS employees and GU staff based in NHS property - you are also obliged to inform NHS Health & Safety - As well as the University's "Injury or Dangerous Occurrence Report" form, staff either employed by the NHS, or GU staff based in NHS property are also obliged to inform NHS Health & Safety. Therefore, report all incidents / accidents and known or suspected work or environmental-related ill health to the appropriate NHS manager for your area.

A member of staff (clinical – if exposure to patient/volunteer samples via needle-stick has occurred), should perform a risk assessment (form available from any member of the H&S Committee) with either all relevant information from the patient/volunteer available, or in discussion with the patient / volunteer's GP.

See Section 21 for full details

f) Chemical & Dangerous substances

The Dangerous Substances and Explosive Atmospheres Regulations 2002, known by the acronym DSEAR, aim to protect people from the risks from fires, explosions and other similar events that may occur as a result of the presence, or use of dangerous substances in the workplace. DSEAR is principally concerned, therefore, with the safe use of substances that can create thermal radiation effects (burns) and over-pressure effects (blast injuries). Dangerous substances is a term defined in the Regulations, but includes LPG, most common organic solvents, petrol and explosive dusts. Like the COSHH regulations the fundamental requirement is for a risk assessment to be carried out. All relevant hazards need to be considered initially, but many situations will not require a full format assessment, only those where there is a real risk of fire or explosion caused by these substances and the way they are used.

The key requirements of the Regulations are risks from dangerous substances are assessed and eliminated or reduced.

Principal Investigators are responsible for the implementation of effective risk assessment for work within their control.

Directors of Institutes are responsible for the safe use of flammable liquid stores within their area of responsibility.

For general guidance on chemicals please refer to:

<http://www.gla.ac.uk/services/seps/az/chemicalsafety/>

and

<http://www.gla.ac.uk/services/seps/az/chemicalsafety/chemicalsafety/#d.en.35209>

Further details of DSEAR will be found in the HSE site:

<http://www.hse.gov.uk/fireandexplosion/dsear.htm>

Chemicals or solvents should not be ordered in quantities that greatly exceed the amount required for the task in hand. Not only does the hazard increase with the quantity stored, but also the disposal of excess redundant chemicals is very expensive.

Clearly label all bottles, tubes, cultures etc. with their contents, your name and the date. Also attached a appropriate hazard warning label. Note that it is very expensive and difficult to dispose of unlabelled chemicals, so labels must remain legible until the end of their shelf-life.

Note the availability of specialist cabinets such as fire-resistant solvent cabinets - therefore fume cupboards must not be used as storage units. Chemicals should not be stored outside the laboratory, unless in designated and appropriately constructed stores.

For general information on Dealing with Chemical Emergencies refer to

g) Liquid Nitrogen

Liquid nitrogen is a substance that is used widely in laboratories. Before handling liquid nitrogen all users should contact their **Institute Safety Co-ordinators** for guidance on the use and decanting of liquid Nitrogen. Oxygen monitors must be carried into areas where large volumes of Liquid Nitrogen are stored. All users should read the **Liquid Nitrogen Guidance Notes** which discusses:

(I.) The characteristics and hazards of Nitrogen: Asphyxiation (oxygen deficiency), Cryogenic (cold) burns, first aid for cryogenic burns, Oxygen enrichment, Over-pressurisation of storage containers, Embrittlement of materials.

(II.) Safe Use of liquid nitrogen: Managerial control of liquid nitrogen use, Training, Protective Clothing, Handling liquid Nitrogen, Ventilation requirements, Spillage and release, Alarm Systems.

(III.) Emergency Procedures in the Event of Large Spillage: Evacuate the area and deploy signs if necessary. The area should be ventilated by either opening doors and windows or activate forced ventilation to allow any spilt liquid to evaporate and the resultant gas to disperse. Only attempt to turn off any valves, whilst wearing protective clothing, and only if it is safe to do so. The use/presence of an oxygen deficiency monitor will indicate when it is safe to re-enter the area. Prevent any liquid from entering drains, basements, pits or any confined space where accumulation may be dangerous.

24. EMERGENCY PROCEDURES

All lab areas within ICAMs have notices with shut off procedures for gas, water and electricity (if available). All members of staff and students should familiarise themselves with the procedure for each lab area in case of emergency.

The Fire (Scotland) Act 2005 requires that staff be trained in fire prevention, control and evacuation procedures. In addition, the conditions of the University fire insurance arrangements require that all departments have persons trained as Area Fire Officers.

In the event of fire or other emergency situation, all staff must be aware of the information below:

1. FIRE PRECAUTIONS

a) Training

At an early opportunity new staff must attend a training session in fire-safety (See Section 6). Learn the location of fire alarms, extinguishers and fire blankets - especially in your own area, before commencing work.

Be prepared to use the extinguishers for small fires.

BEFORE IT HAPPENS be familiar with the information on fire prevention and on fire-fighting.

Do not wedge or prop-open the fire doors in corridors or that safeguard staircases.

Keep access and escape routes clear.

Report missing, damaged and used fire extinguishers to any member of the local Safety group.

Do not allow waste paper and combustible materials to accumulate.

Do not use corridors and under stairways as storage areas.

Smoking is forbidden at all times.

Be aware of specific fire hazards if working in laboratories – at the main exit of each laboratory there is a list of gas cylinders, solvents and chemicals and their hazards.

b) Fire Wardens/Officers

Fire Wardens/Officers are appointed to check their specified area is being kept hazard free. If the nominated Warden highlights a potential fire risk this must be reported to the appropriate member of staff and rectified immediately.

In the event of a fire, the Fire Wardens/Officers have a number of duties to undertake –
alert staff regarding evacuation by correct routes.

ensure all rooms, including toilets, have been evacuated.

ensure all fire-doors are closed.

make yourself known to fire service and provide details about staff accounted for and other information which may be of use e.g. hazardous chemicals, solvents, gas cylinders etc. or other hazards in your area.

Staff *must* fully co-operate with the Wardens and adhere to any instruction given to ensure safety. Failure to heed instruction will be reported to the appropriate Fire Officer, Convenor of H&S and the Head of Institute.

c) Lectures / meetings

Staff presenting lectures or hosting meetings must ensure the audience is informed of the appropriate emergency exits, escape routes and assembly points for the venue. This should be carried out each time a lecture / meeting is held. If the fire alarm sounds, it is the responsibility of lecturers / meeting convenors to ensure that students / guests are safely evacuated.

d) Personal Emergency Evacuation Plan

The aim of a Personal Emergency Evacuation Plan (PEEP) is to provide a safe route of exit for people with a disability and to ensure that the correct level of assistance is always available.

It is the responsibility of the local Safety Co-ordinator to talk to disabled staff to identify whether they require any assistance in the event of an emergency. If a member of staff requires assistance the Emergency Evacuation Questionnaire should be completed with the assistance of the local Safety Co-ordinator. Given the unique characteristics of buildings, disabled persons who regularly use different buildings may have to have a separate PEEP for each building. If personnel work in any of the NHS building occupied by the University, they will require to complete an NHS PEEP.

The following University website which contains extensive information on disability evacuation policy, including guidelines and forms –

<https://www.gla.ac.uk/myglasgow/seps/az/firesafety/assistedevacuation/#d.en.279378>

The NHS PEEP is available from local Safety Co-ordinators in hospital areas.

e) If you discover a fire/emergency or suspicious burning smell:

Raise the alarm by breaking the glass of the nearest fire alarm call point, (normally found at ends of corridors close to stairways and exits).



GCRC / WLC - if a telephone is within reach, the person discovering the fire should ALSO call the Fire Service by dialling **4444**.

GCRC Assembly Point - University Place

WLC - Kelvin Building Car Park / Zoology Building

GRI & QEUH - if a telephone is within reach, the person discovering the fire should ALSO call the Emergency Hot line by dialling **2222**.

New Lister Building (GRI) Assembly Point – Concourse at the front of the building on Alexandra Parade.

QEUH Assembly Points: Teaching & Learning Centre – assembly point 7 at the front of the building.

When telephoning for assistance in an emergency, give the following information:

The location from which you are telephoning.

The type of emergency and the type of assistance required.

The place where the assistance is required.

To ensure that your message has been correctly received, ask for it to be repeated back to you.

If you judge it safe to do so - tackle the fire using extinguishers or a fire blanket. (Fire hoses are for the use of the fire brigade.) However, discretion is important in deciding the length to which "first aid" fire-fighting is carried out. Tactics will depend on individual circumstances, e.g. the building structure and layout, the contents and the particular use of the building. However do not over assess your own ability to cope.

There are several important factors when fighting a fire:

The protection of human life is paramount.

Use the emergency phone number to contact the fire brigade. (Recommended for all outbreaks of fire, as a fire, which may seem out to the layman may not be, with serious consequences later.)

Smoke, oxygen depletion and toxic vapours are the major hazards when firefighting. Regard large quantities of smoke as a warning of a lack of oxygen and/or the presence of toxic gases.

If the fire is in a closed room, do not open the door. A fresh supply of air can cause a slow fire to flare up.

As soon as everyone has left an area, close windows and doors to limit the spread of smoke and heat. (And if possible switch off fume cupboards if in a lab area.)

Make sure that someone else knows you are attacking the fire.

Use the correct type of fire extinguisher (see below). The wrong choice can turn a minor incident into a major disaster. However portable fire-fighting equipment is not designed to cope with extensive fires, so before the fire gets out of control, it is important that "first aid" firefighting should cease and the location be evacuated.

If attempts to extinguish the fire are proving unsuccessful, close windows and doors and proceed to evacuate the premises by the nearest possible route. The golden rule is "if in doubt, get out".

f) Fire Extinguishers

There are several types of fire extinguishers available for use in the Institute; each has different properties.



Water Extinguisher produces enough water under pressure to extinguish small fires such as waste paper basket, clothing, curtains etc. This type of extinguisher must not be used on electrical or oil related fires.



Carbon Dioxide Extinguisher produces a high-pressure stream of carbon dioxide gas, which should be directed at the base of the fire. The gas depletes the fire of oxygen and also cools the source of the fire. It is regarded as the general-purpose extinguisher for use in the laboratory but is ineffective against alkali metals. Do not use a Carbon Dioxide Extinguisher on wastepaper baskets – as the pressure will merely spread the flaming contents outside the basket.

Fire Blanket - this is effective in smothering clothing fires.

Hose Reels - these are located in corridors. It is unlikely that staff will need to use them as they are primarily for the use of the Fire Service. Indeed, the use of water should be avoided if the cause of the fire is known to be an alkali metal, metal hydride, an oil bath or electrical equipment.

g) Emergency Evacuation

Continuous ringing of the alarm sounders indicates there is a fire and that everyone must immediately leave the building and muster at the nearest Assembly Point. Do not use lifts. Do not collect personal belongings. Close any doors that you pass. Report to the appropriate Fire Warden.

h) Fire drills

GCRC has scheduled fire drills from time to time, as does the West Medical / Davidson Buildings.

The alarm sounders are tested weekly –

GCRC – Wednesday mornings about 10:00am

WLC – Wednesdays about 09:00am

New Lister Building - on a Thursday morning.

QEUH - on a Wednesday morning.

For further information on Fire safety and procedures access SEPS at

<http://www.gla.ac.uk/services/seps/az/firesafety/>

2. SUSPICIOUS LETTERS or PACKAGES

Terrorist or criminal incidents of this nature are extremely rare. However, if there is a concern that a suspect biological/chemical package has been received, sensible steps can be taken to minimise the risk of exposure and the possibility of harm. The overall message is to remain calm. There are practical steps to be taken immediately if you receive a suspect package or come into contact with a biological (e.g. anthrax) or chemical substance.

General Mail Handling - What to look for:

Do not assume that a letter apparently arriving by Internal University Mail is automatically safe

Look out for suspicious envelopes or packages (see below for some things that should trigger suspicion).

Open all mail with a letter opener or other method that is least likely to disturb contents.

Open packages/envelopes with a minimum amount of movement.

Do not blow into envelopes.

Do not shake or pour out contents.

Keep hands away from nose and mouth while opening mail.

Wash hands after handling mail.

IF YOU ARE IN ANY DOUBT ABOUT A PACKAGE, DO NOT TOUCH IT, MOVE IT OR OPEN IT.

GCRC, West Medical / Davidson Buildings - ALERT CENTRAL SERVICES ON 4444.

GRI & QEUH – call the Emergency hotline on 2222

Some items that can trigger suspicion:

Discolouration, crystals or surface, strange odours or oily stains

Envelope with powder or powder-like residue

Excessive tape or string

Unusual size or weight given size

Lopsided or oddly-shaped envelope

Postmark that does not match return address

Restrictive endorsements such as 'Personal' or 'Confidential'
Excessive postage
Handwritten, block-printed or poorly-typed addresses
Incorrect titles
Title but no name
Misspellings of common words
No return address
Addressed to individual no longer with organisation

General Mail Handling - What to do:

If you believe you have received a contaminated package
Do not touch the package further or move it to another location
Shut windows and doors in the room and leave the room, but keep yourself separate from others and available for medical examination
Switch off any room air conditioning system
Notify building manager

3. TELEPHONE THREATS

The police take the view that just as anyone can have a fire, anyone can get a telephone threat – usually a bomb threat. If a threat is made by telephone, attempts should be made to get the maximum information from the caller. The police should be contacted. The threat is evaluated and the premises searched. If a suspect device is found, the building should be evacuated. If you receive a threatening call (bomb or other physical harm), do not hang up on the caller.

GCRC / WLC - Ask somebody nearby to call **Central Services** on **4444** (from another extension).

GRI & QEUH – ask someone to call the Emergency hotline on 2222 (from another extension).

Attempt to engage the caller in a conversation and get as much information as possible.

Take notes; pay attention
What exactly is the threat?
Is the voice familiar in any way?
Male or female? Young or old?
Calm? Angry?
Stutter?
Accent?
Is there any sound in the background?
Record the caller's exact words if possible

If it is a bomb threat, ask these questions as well:

When is it going to explode?
Where is the bomb?
What does it look like?
What kind is it?
What will cause it to explode?
Who placed the bomb?
Why was the bomb placed?

**Safety within Cardiovascular & Medical Sciences is the responsibility of each & every individual.
Accidents do not just happen ... they are always caused.**

APPENDIX

Local Safety Co-ordinators – BHF-GCRC

	Name	Telephone	Email
Safety Co-ordinators	Elaine Butler (Level 2)	330-4344	Elaine.Butler@glasgow.ac.uk
	Wendy Beattie (Level 3)	330-8015	Wendy.Beattie@glasgow.ac.uk
	Nicola Britton (Level 4)	330-4962	Nicola.Britton@glasgow.ac.uk
Fire Officer	Nicola Britton	330-2393	Nicol.Britton@glasgow.ac.uk
Assistant	Elaine Friel	330-4962	Elaine.Friel@glasgow.ac.uk
Fire Wardens			
Floor 2 -	Elaine Butler	330-7327	Elaine.Butler@glasgow.ac.uk
	Emma Dunning	330-7327	Emma.Dunning@glasgow.ac.uk
Floor 3 -	Wendy Beattie	330-8015	Wendy.Beattie@glasgow.ac.uk
	Dannie Fobian	330-	Dannie.Fobian@glasgow.ac.uk
Floor 4 -	Nicola Britton	330-2393	Nicola.Britton@glasgow.ac.uk
	Elaine Friel	330-4962	Elaine.Friel@glasgow.ac.uk
Institute Safety Supervisors			
Radiation Protection	John McAbney	330-4483	John.McAbney@glasgow.ac.uk
Biological Safety Co-ordinator (Institute)	Scott Mackenzie	330-2699	Scott.Mackenzie@glasgow.ac.uk
Genetic Modification Safety	Fiona Leiper	330 2757	Fiona.Leiper@glasgow.ac.uk

First-Aiders			
Floor 2 -	Elaine Butler	330-7327	Elaine.Butler@glasgow.ac.uk
	Ross Hepburn	330-7327	Ross.Hepburn@glasgow.ac.uk
Floor 3 -	Dannie Fobian	330-2627	Dannie.Fobian@glasgow.ac.uk
	Wendy Beattie	330-8015	Wendy.Crawford@glasgow.ac.uk
Floor 4 -	Wendy Beattie	330-8015	Wendy.Crawford@glasgow.ac.uk
	Nicola Britton	330-2393	Nicola.Britton@glasgow.ac.uk
General Building -	Central Services	330-4444	

First Aid boxes	Level 2 (Met. Med. Lab)
	Level 3 (Room 335)
	Level 4 (Lab 402 – Main Lab)
	GBRC
	Central Services

Minor Injuries – QEUH	Tel: 0141 201 1100 Located at 1345 Govan Road, Glasgow, G51 4TF
QEUH Accident & Emergency	201-1100 (If an ambulance is required call 999)

IN CASE OF FIRE:

Raise the alarm by breaking the glass of the nearest fire alarm point (normally found at ends of corridors close to stairways and exits).

If a telephone is within reach, the person discovering the fire should ALSO call the Fire Service by dialling **4444** OR **0141 330 4444**.

Assembly Point - University Place

Local Safety Co-ordinators – Davidson Building (ICAMS)

	Name	Telephone	Email	
Safety Co-ordinators	David Hughes	330-6132	David.Hughes@glasgow.ac.uk	
	Michelle Lee	330 5628	Michelle.Lee@glasgow.ac.uk	
Fire Officer	John McDougall (MVLS Facilities)	330-8447	John.McDougall@glasgow.ac.uk	
Assistant	Ian Gibson (MVLS Facilities)	330-6800	Ian.Gibson@glasgow.ac.uk	
Fire Warden (Level 4)	Michelle Lee	330-5628	Michelle.Lee@glasgow.ac.uk	
	Steph Holt (SoLS) (Rm 412)	330-6229	Stephanie.Holt@glasgow.ac.uk	
Radiation Protection Supervisor (Building)	Sarah Cumming (MSCB)	330-6229	Sarah.Cumming@glasgow.ac.uk	
	For ICAMS	John McAbney	330-4483	John.McAbney@glasgow.ac.uk
First-Aiders:	Level 4	Steph Holt (SoLS) (Rm 412)	330-6229	Stephanie.Holt@glasgow.ac.uk
		Joanna Wilson (SoLS) (Rm 419)	330-5108	Joanna.Wilson@glasgow.ac.uk
General Building -	Central Services	330-4444		

First Aid boxes	Located in individual labs
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Minor Injuries – QEUH	Tel: 0141 201 1100 Located at 1345 Govan Road, Glasgow, G51 4TF
QEUH Accident & Emergency	201-1100 (If an ambulance is required call 999)

IN CASE OF FIRE:

Raise the alarm by breaking the glass of the nearest fire alarm point (normally found at ends of corridors close to stairways and exits).

If a telephone is within reach, the person discovering the fire should ALSO call the Fire Service by dialling **4444**.

Assembly Points:

Kelvin Building Car Park / Zoology Building

Local Safety Co-ordinators –GRI: New Lister Building (ICAMS) and Joseph Black

	Name	Telephone	Email
Safety Co-ordinator	Ann Harold	201 8510	Ann.Harold@glasgow.ac.uk
For ICAMS, New Lister Building			
Safety Coordinator	Sheon Samji	330 2627	Sheon.Samji@glasgow.ac.uk
Joseph Black			
First-Aiders	To be appointed		
GRI Accident & Emergency (Reception Desks) –		29220 / 25608 / 24484 / 24214	
First Aid boxes			

IN CASE OF FIRE:

Raise the alarm by breaking the glass of the nearest fire alarm point (normally found at ends of corridors close to stairways and exits).

If a telephone is within reach, the person discovering the fire should ALSO call the Fire Service by dialling **2222**.

New Lister Building Assembly Point – Outside the Alexandra Parade Entrance, beside the McEwan Building.

Local Safety Co-ordinators – Sir James Black (ICAMS)

	Name	Telephone	Email
Safety Co-ordinator			
	Elaine Brown	330-7744	Elaine.Brown@glasgow.ac.uk
	Gillian Lappin (SGDB)	330-6388	Gillian.Lappin@glasgow.ac.uk
	David Hughes	330-6132	David.Hughes@glasgow.ac.uk
Fire Officer	John McDougall (MVLS Facilities)	330-8447	John.McDougall@glasgow.ac.uk
Assistant	Ian Gibson (MVLS Facilities)	330-6800	Ian.Gibson@glasgow.ac.uk
Fire Wardens			
Floor 2	Fiona Jordan	330-8343	Fiona.Jordan@glasgow.ac.uk
Floor 4	Aileen Rankin	330-4612	Aileen.Rankin@glasgow.ac.uk
	Michael Dunne	330-2489	Michael.Dunne@glasgow.ac.uk
	John McAbney	330-4483	John.McAbney@glasgow.ac.uk
Radiation Protection Supervisor (Building)	Sarah Cumming (MSCB)	330-6229	Sarah.Cumming@glasgow.ac.uk
ICAMS	John McAbney	330-4483	John.McAbney@glasgow.ac.uk
First-Aiders:			
Sir James Black. Building	Fiona Jordan (Level 2)	330-8343	Fiona.Jordan@glasgow.ac.uk
	Lynsey Johnston (SoLS) (Rm 242)	330-6287	Lynsey.Johnston@glasgow.ac.uk
	Niall MacFarlane (SoLS.) Rm 240B	330-5965	Niall.MacFarlane@glasgow.ac.uk
	Michael Dunne (Level 4)	330-2489	Michael.Dunne@glasgow.ac.uk
	Aileen Rankin (Level 4)	330-4612	Aileen.Rankin@glasgow.ac.uk
	John McAbney (Level 4)	330-4483	John.McAbney@glasgow.ac.uk
General Building -	Central Services	330-4444	

Minor Injuries – QEUH	Tel: 0141 201 1100 Located at 1345 Govan Road, Glasgow, G51 4TF
QEUH Accident & Emergency	201-1100 (If an ambulance is required call 999)

First Aid boxes	Lab 204B opposite room 242 vestibule 440
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IN CASE OF FIRE:

Raise the alarm by breaking the glass of the nearest fire alarm point (normally found at ends of corridors close to stairways and exits).

If a telephone is within reach, the person discovering the fire should ALSO call the Fire Service by dialling **4444**.

Assembly Points:

Kelvin Building Car Park / Zoology Building

QEUH – Teaching & Learning Centre)

	Name	Telephone	Email
Fire Officer	Gibby Donnelly (NHS)		

IN CASE OF FIRE:

Raise the alarm by breaking the glass of the nearest fire alarm point (normally found at ends of corridors close to stairways and exits).

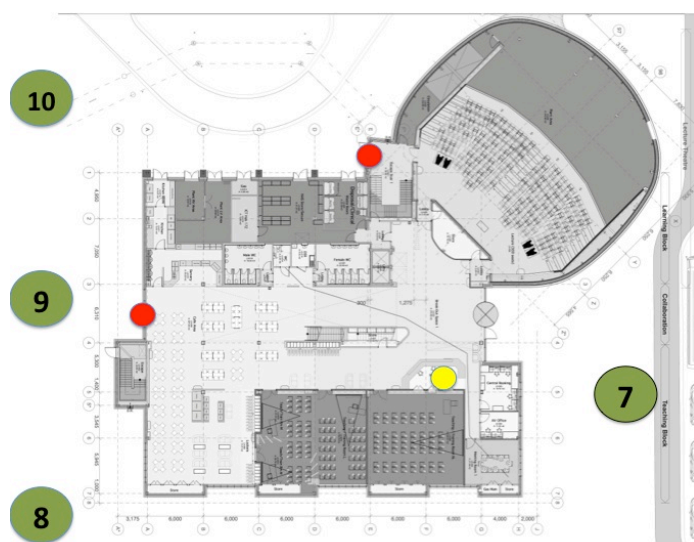
If a telephone is within reach, the person discovering the fire should ALSO call the Emergency hotline by dialling **2222**.

Fire Assembly Point 7

Green dot = numbered assembly point

Red dot = escape stair

Yellow dot = main reception



QEUH – Laboratory Medicine & Facilities Management Building)

(Specialist Lipids Lab, Metabolic Medicine, Level 1 (Room B/065))

	Name	Telephone	Email
Safety Co-ordinator	Philip Stewart (ICAMS)	354-9112	Philip.Stewart@glasgow.ac.uk
Fire Officer	Gibby Donnelly (NHS)		

University Contacts:

The Health, Safety and Wellbeing department (<http://www.gla.ac.uk/services/health/>) is the first point of contact out with the Institute, regarding H&S matters.

HS&W are split into three main branches –

- **Occupational Health**, based at 63 Oakfield Avenue, Glasgow, G12 8LP – <http://www.gla.ac.uk/services/occupationalhealthunit/> - which has been set up to protect health whilst at work, assess and advise on ongoing fitness for work and ensure that work related health issues are managed effectively.
- **Radiation Protection Service**, based in the Kelvin Building, Gilmorehill, Glasgow, G12 8QQ – <http://www.gla.ac.uk/services/radiationprotection/> - to provide information and advice to all departments, students and staff on safety issues arising from the use of ionising and non-ionising radiation.
- **Safety & Environmental Protection Services (SEPS)**, based in the Pearce Lodge, Gilmorehill, Glasgow, G12 8QQ - <http://www.gla.ac.uk/services/seps/> - to assist the University in integrating safe working practices into its activities. SEPS monitor these activities and provide advice on routes designed to ensure that the University complies with health and safety and environmental legislation. SEPS can also provide specialist advice on fire, biological and chemical safety as well as construction safety and waste and environmental issues.

There are numerous specialist contacts available at SEPS to give advice on a range of H&S matters:

David McLean	Head of Service	David.McLean@glasgow.ac.uk	0141-330 4678
Philip Rodger	Chemical Safety Adviser	Philip.Rodger@glasgow.ac.uk	0141-330 2799
Alice Gallagher	Biological Safety Adviser	Alice.Gallagher@glasgow.ac.uk	0141-330-7105
Billy Russell	Senior Fire Officer	Billy.Russell@glasgow.ac.uk	0141-330-4202
Alan Watson	Fire Officer	Alan.Watson@glasgow.ac.uk	0141-302 6109
Steve Johnston	Environmental Adviser	Steve.Johnston@glasgow.ac.uk	0141-330 4202
Josephine McNally	Administrator	Jo.McNally@glasgow.ac.uk	0141-330 5532

Other useful GU web addresses:

Emergency response <http://www.gla.ac.uk/services/central/trafficandsecurity/emergencyresponseguidanceforstaffandstudents/>

University Computing Service - <http://www.gla.ac.uk/services/it/helpdesk/>

Disposal of Electrical Equipment <http://www.gla.ac.uk/services/seps/waste/electricelectronicsequipment/>

EMERGENCY RESPONSE: Guidance for Staff & Students

Critical contact numbers in the event of an emergency are:

Gilmorehill Campus ext. **4444** (0141 330 4444)

Garscube Campus ext. 2222 (0141 330 2222)

Emergency Services

Fire Brigade 999 (Office 0141 302 3111)

Police 999 (Office 0141 532 3500)

Ambulance 999

Minor Injuries at Queen Elizabeth University Hospital – Tel: 0141 201 1100
Located at 1345 Govan Road, Glasgow, G51 4TF

Accident & Emergency - Queen Elizabeth University Hospital – Tel: 0141 201 1100
Located at 1345 Govan Road, Glasgow, G51 4TF

University of Glasgow Safety & Environmental Services ext. 5532 (0141 330 5532)

Estate & Buildings

Helpline ext. 6000 (0141 330 6000)

General Office ext. 3577 (0141 330 3577)

What To Do When Faced With An Emergency Situation

If you become aware of an emergency situation, you should immediately phone 999 if necessary and then inform Security Control (4444) only if it is safe to do so, saying

- (a) where you are speaking from, your name and telephone number.
- (b) the nature and exact location of the incident.
- (c) how you have come to know about the emergency.
- (d) information re any casualties, if known; and
- (e) any other relevant information

Security Staff will assume immediate responsibility for the initial response to the situation, liaising with senior university staff and the emergency services.

On their arrival, the emergency services (Police, Fire and Ambulance) will take control of the situation. The University will provide support services and facilities as required.

Our Security Staff have a vital role in supervising the initial response to an emergency situation.

The University has an Emergency planning and Incident Control Group who will assume responsibility for coordinating the University's management of an emergency situation.