SMALL ANIMAL HOSPITAL

HEALTH AND SAFETY POLICY
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HEALTH AND SAFETY POLICY

The University of Glasgow, as employer, and all employees have certain obligations under the Health and Safety at Work Act (1974). All members of the Hospital have a duty to take reasonable care for their own safety and welfare at work and also that of other people likely to be affected by their actions. They must co-operate with the University in complying with the regulations of this Act.

Safety within the Hospital is the responsibility of the Clinical Director of The Small Animal Hospital but it is essential that members of staff are fully aware of the potential hazards that may be encountered during their working day and endeavour to minimise any such risks. The remit of the Hospital Safety Committee, which includes senior staff from all areas within the Hospital, is to advise the Clinical Director of the Small Animal Hospital on safety matters and to maintain and improve health and safety at work. This is particularly important when new or improved work practices are introduced which may affect the health and safety of employees within the Hospital.

The convenor of the Hospital Safety Committee and Hospital Safety Officer is Mr. Calum Paterson. The names of the safety committee members and their particular areas of responsibility are posted on the Health and Safety notice boards in the Hospital Clinical area and at the Case Reception Office, along with the minutes from the most recent committee meeting. Minutes from previous meetings are available on the Faculty Web Site. If any member of staff has concerns regarding health and safety practices, they should notify the appropriate Area Safety Officer who will raise the issue at the next Committee meeting.

The Hospital recognises the importance of Health and Safety at work, and will commit resources to the continual development of safe working practices. The minutes of the Hospital Safety Committee meetings are passed to the Faculty Health and Safety Group to ensure that the recommendations of the Committee are fulfilled.

All identified working areas within the Hospital will be inspected on a regular basis by the senior staff responsible for each area and a report submitted to the Convener of the Safety Committee. In day-to-day running of the laboratories and clinical areas, the appropriate member of the Safety Committee will ensure that all individuals working within these areas are aware of the safety regulations and will convey relevant information from the Committee to all other members of staff by discussion or written reports. These persons will be responsible for all aspects of safety, introduction of new methods and movement of equipment within their designated area. In addition, service group leaders, administrators and senior nurses must ensure that all people within their group fulfil safety regulations. However, individuals have a responsibility to use their experience, knowledge and training while working in the Hospital.

Any persons repeatedly violating safe practice may be asked to discontinue their work. Disciplinary measures will be instigated against staff in laboratory or clinical areas that disregard safety regulations.

Mr. Calum Paterson 01/02/2010
UNIVERSITY OF GLASGOW VETERINARY SCHOOL
SMALL ANIMAL HOSPITAL

Safety Committee Constitution

1) The Safety Committee of the Small Animal Hospital has the remit to advise the Clinical Director of The Small Animal Hospital on all matters pertaining to the Health and Safety of staff, students and all other people likely to be affected by the activities undertaken in the Hospital.

2) The Committee is convened by the Hospital Safety Officer and should be comprised of members representing each of the major areas of the Hospital. Each member shall be considered the Safety Officer of that area.

3) The Committee will convene once per academic term, however additional meetings will be held on request.

4) All members of staff may raise issues of importance regarding safety at work with the under members of the committee who will ensure that the matter is dealt with or raised at the next Committee meeting.

5) The Minutes of the Hospital Safety Committee meetings will be passed to the Clinical Director of The Small Animal Hospital and the Faculty Safety Committee for review, approval of actions and allocation of resources.

6) The Minutes of the Hospital Safety Committee meetings are archived on the Faculty Committees Web Site.

7) To ensure ongoing Policy Development, the Committee will review the Hospital Safety Policy and Performance in the Candlemas Term of each year.
Small Animal Hospital Safety Management Structure

Clinical Director of S. A. Hospital
Dr. M. Jackson

Areas of Responsibility for Safety
Overall Safety within the Hospital with advice from Hospital Safety Officer and Safety Committee

Divisional Heads
Prof. D. Bennet
Prof. S. Love
Prof. W. Steel
Prof. T. J. Anderson
Dr. C. Knottenbelt

Associate Dean of Clinical Services
Equine Clinical Studies
Animal Production and Public Health
Associate Dean of Teaching and Learning
Companion Animal Studies

Hospital Safety Officer
Mr. Calum Paterson
Convenor of Safety Committee, Safety Adviser to Clinical Director of Small Animal Hospital.

Area Safety Officers
Mrs. Angela Wallace / Ms. Julie Hermit
I.C.U/HDU
Ms Lindsey Becket / Mr. Raymond MacDonald
Reception Area / Consulting Rooms
Mrs. Nicola Brannon / Mrs Gill Cameron
Diagnostic Imaging Area
Mrs. Sharon Smith / Mrs. P. McComb / Ms. Gail Hunter
Hospital Wards / Dog Runs / Laundry
Ms. Janis Hamilton / Ms. Ruth Wallace
Nursing School
Mrs. Sharon Smith / Mrs. Pam McComb
Isolation Ward
Mrs. Lynn Darby / Mrs. Sharon Smith
Treatment area / Endoscopy
Mrs. Gillian Calvo / Ms Lorraine Jackson
Pain & Rehab. Areas
Ms. Samantha Fontaine / Ms. Jenny Helm
Oncology
Ms Kathryn Pratschke / Ms J. Reid / Ms Emma Wincott
Theatre Areas
Mrs Pamela McComb / Ms. Gail Hunter
Pharmacy

Specific Areas of Responsibility
Prof. I. K. Ramsey / Dr. M. Jackson
Radioisotope Area
Nicola Brannon / Gill Cameron
Radiation Protection Supervisor
Ms. Sam Fontaine / Ms. Jenny Helm / Dr. J. Morris
Chemotherapy Ward / Linac Room
GENERAL

All staff must read the Small Animal Hospital Health and Safety Policy in conjunction with the 'University of Glasgow Safety Handbook.' Copies of these publications are available from the Senior Nurses.

It is the duty of every member of staff, while at work, to take reasonable care to ensure their own health and safety and that of other persons who may be affected by their actions, to comply with the 'Hospital Health and Safety Policy' and the 'Health and Safety Code of Practice' and to utilise properly all facilities provided in the Hospital.

If any member of staff has doubts about the safety of a particular specimen, technique, chemical or piece of equipment, they must at once seek the advice of the safety supervisor in their work areas who, in turn, must report to the safety officer. The potential hazards in the Hospital are numerous and are dealt with in detail in individual COSHH risk assessments. Forms for compilation of these assessments are available from Calum Paterson (ext.3138) or Arlene Macrae (ext.6918) All staff have a duty be familiar with the nature and risk of the materials or equipment, which they are handling (e.g. carcinogenic, flammable, infectious, radioactive, sharps, heavy weights). The Safety Committee has the responsibility of ensuring that this information is readily available to all staff.
1. **PROTECTIVE CLOTHING**

1.1 All Hospital staff, students and visitors working within the Hospital Clinical area are required to wear appropriate protective or disposable clothing/tunics at all times. Non-disposable clothing should be changed regularly and placed in the receptacles provided.

1.2 Tunics must be left in the hospital at breaks and on finishing work. Once in use, tunics/scrub suits and other protective clothing must not be put into lockers and **never** be taken home to launder.

1.3 Protective clothing or footwear must not be worn in the refectory, common rooms or offices. Coats, bags and other personal belongings must not be brought into the Clinical areas but kept in offices or lockers.

1.4 Disposable gloves must be worn when handling potentially infectious material or hazardous chemicals.

1.5 **Any allergies to latex gloves must be reported to a Clinician or Senior Nurse so as to identify alternative supply.**

1.6 A telephone must never be answered while wearing disposable gloves.

1.7 Gloves should be removed before leaving the clinical area and disposed of in the appropriate receptacle (see 11. Disposal).

1.8 All gloves should be treated as infectious waste.

1.9 Masks must be worn when handling potentially infectious material or hazardous chemicals outside of safety hoods and after use disposed of in the appropriate receptacle (see 11. Disposal).

2. **HYGIENE**

2.1 The Hospital supports the no smoking policy implemented by the University in 1995.

2.2 All laboratory and clinical areas must be kept clean and tidy. At the end of each working day, everyone should ensure that no hazardous material remains in non – secure areas.

2.3 All spillages within the Hospital must be cleaned up **immediately**.

2.4 Animals which defaecate or urinate in the hospital should be restrained (by another person or by tying the lead to a secure point) as soon as possible and immediate action taken to clean the area affected.

2.5 All areas must be made safe for unsupervised domestic staff, works staff, outside contractors or service engineers before they begin work in the Hospital.
2.6 Staff members or students should never sit on benches in the consulting rooms or wards.

2.7 There must be no eating, drinking, or application of cosmetics within laboratory or clinical areas. Food and drink are only permitted in the common rooms or offices and must never be brought into any of the other areas or stored in any of the laboratory or clinical fridges or freezers.

2.8 Mouth pipetting is expressly forbidden. Always use the pipetting devices provided.

2.9 Staff should wash their hands before and after all clinical procedures.

2.10 In the interest of safety and hygiene long hair should be tied back.

3. **BLOOD AND BODY FLUID SPILLAGE.**

3.1 Any spills should be cleared up *immediately*.

3.2 Disposable gloves must be worn and appropriate cleaning facilities (e.g. mops, paper towels) used when dealing with spills. To complete the cleaning process the area must be swabbed down with Trigene (1:49 solution) for effective decontamination. All contaminated material should then be placed in a yellow bag and put into a clinical waste bin for uplift and disposal.

3.3 If sharps are involved in a blood spill, then the spill should be contained with paper tissues, then the fragments swept, with a brush, into a dustpan, then into a Biohazard bag. The sealed bag should then be placed into the Sharps Containment bin for disposal. The area must be swabbed with Trigene as described (Page 8. 4.2.).

4. **SPECIMENS**

4.1 All biological specimens are potentially hazardous. They must only be handled in clinical areas and they should never be taken into any offices within the department.

4.2 Specimens received by post and delivered to staff offices should be removed to the critical care laboratory before being unpacked and processed.

4.3 A major risk when working with hazardous biological materials is the production of aerosols leading to the inhalation and ingestion of the material. Therefore extreme care must be taken when dealing with samples that might produce aerosols (e.g. urine).
5. **FRACIOUS ANIMALS**

5.1. All animals can potentially bite, scratch, kick or otherwise injure staff. Zoonotic or secondary bacterial infections are an associated hazard. Staff must handle all animals carefully such that they and other humans are not harmed. The safety of the animal is only a secondary consideration.

5.2. Any aggressive animal should be suitably restrained such that the risk of human injury is minimised. Staff and students who are unsure of their abilities to adequately restrain a particular animal should seek advice before approaching the animal. Chemical restraint is usually superior to physical restraint and is usually safer for patients and staff alike. Dog catchers are only to be used under the direct supervision of a clinician.

5.3. Any animal which might bite should be muzzled before handling. Owners should not be asked to muzzle their own animals.

6. **ALLERGIES**

Any allergies to specific animals (e.g. cats, rabbits) must be reported to Clinician or Senior Nurse.

7. **RADIOACTIVE MATERIAL**

7.1. All persons using radioactive sources must read and comply with the local rules for the use of radioactive material and the 'Health Physics Notes' drawn up for the University, copies of these are available in each radiation area.

7.2. Emergency procedures are posted within the radiation suite and designated radiation areas. Users of radioactive materials must be familiar with these procedures before handling radiation.

7.3. All persons using radioactive materials must wear the radiation film badge provided on their lab coat and return the film to the Radiation Protection Supervisor at each renewal date (Page 9. 5.5).

7.4. Before any work involving radiation is carried out a risk assessment form should be completed. These are available from Prof. I. Ramsey. They are also available on the Radiation Protection Service web site; (http://www.gla.ac.uk/services/radiationprotection/risk1.doc).
7.5. The Radiation Protection Supervisor for the Small Animal Hospital is Nicola Brannon (ext.6961/6830) The Radiation Protection Officer is Mr. J. Gray (ext.5878) who should be contacted in the event of any accident or difficulty with radioactive material.

7.6. Any member of the hospital student/staff working within a radiation environment becoming pregnant is advised to contact the Hospital Radiation Protection Supervisor, in confidence, regarding work with radioactive materials.

7.7. In the event of a radioactive spill: protect other personnel from radiation, evacuate non-contaminated staff and ask them to inform the Radiation Protection Supervisor of the situation (ext 5878), confine the spill, decontaminate involved personnel and finally decontaminate the affected area. Restrict entry until area is rendered safe. For further details consult the local rules in conjunction with 'Health Physics Notes'.

8. **Chemicals and Drugs.**

8.1. Many of the chemicals and drugs used in the Hospital are potentially dangerous and care must always be exercised when handling them. Instructions for making up chemical solutions and drugs must be carefully followed. Always read COSHH assessments covering the procedure or chemical in use.

8.2. Other than essential, non-controlled drugs required for overnight use in specific wards; all drugs must be replaced in appropriate cupboards or in the Pharmacy.

8.3. Independent Health and Safety regulations with additional aspects relating to student safety are available for the divisions of Animal Production and Public Health, Weipers Equine Centre and the Small Animal Hospital within the ‘Course Information’ booklets.

8.4. Personal solutions and supplies of chemicals and drugs must always be labelled with your name, date and contents.

8.5. Chemicals and drugs must always be stored in their original containers except when drugs have been dispensed.

7.6 **Anaesthetic Gas Scavenging:** Active scavenging is used routinely during all inhalational anaesthetic procedures. Precautions are taken, as far as reasonably practicable, to reduce atmospheric pollution with volatile anaesthetic agents and nitrous oxide (endotracheal intubation, key-fill vapourisers, limited mask induction etc.). Annual gas monitoring is carried out to ensure levels fall below occupational exposure standards.
7.7 **Acids and Alkalis**: A visor or safety glasses must be worn when handling concentrated acid or alkali, except when inside a fume hood. Concentrated acids and alkalis must not be stored in the same cabinet due to their potentially explosive combination.

7.8 **Flammable Substances**: These must be stored only in the flameproof safety cabinets in each laboratory. No more than 50ml of a flammable substance should be kept on the bench. Flammable substances should not be stored in domestic refrigerators or freezers. Flammable substances must never be used on the same bench as a naked flame or hot plate, which is still, or has recently been, in use.

7.9 **Disinfectants and Detergents**: Many of these are harmful hence gloves and eye protection are advisable. (e.g. Decon 90 is alkaline and particularly corrosive to metals). Therefore, it should not be used for the decontamination of these items.

7.10 **Liquid Nitrogen**: No Liquid Nitrogen should be used within the hospital. Individuals who require using Liquid Nitrogen should consult Mr. C. Paterson (ext. 3138).

7.11 **Solid carbon dioxide (CO₂)**: No Solid Carbon Dioxide should be used in the Hospital. Individuals who require using Solid Carbon Dioxide should consult Mr. C. Paterson (ext. 3138).

### 8 **Equipment**

8.1. It is the responsibility of all staff to ensure that they have been instructed in and understand the proper use of all equipment within the Small Animal Hospital. These instructions can be found in the Small Animal Hospital Standard Operating Procedures (SOP’s), which are located in the various work areas throughout the Hospital.

8.2. Every item in clinical areas has its designated place. Moving and failing to return equipment from one area to another is bad practice. Before borrowing a piece of equipment, permission must be obtained from the responsible person for that area. Equipment must be returned in both a clean and working order immediately after use.

8.3. **General Equipment**: It is the responsibility of each user to leave equipment clean, tidy and in working order. If the equipment is not in working order or is in an unacceptable condition, report this to the safety officer for that area.

8.4. All equipment must be rendered safe for access by service engineers and maintenance personnel before they begin work.
8.5. **Centrifuges:** Care must be taken to balance samples correctly. Any internal lids or protective plates should be screwed into position prior to switching the centrifuge on. After any spills or breakage of tubes the centrifuge must be decontaminated (e.g. with 70% ethanol) and sharps placed in the Sharps Containment bin.

8.6. **Hoses and Tubing:** Any item of equipment attached to the water supply on a long-term basis (e.g. overnight), must be secured by hose clips and the outflow to the drain must be checked.

8.7. **Electrical Equipment:** To fulfil the legal requirement all portable electrical equipment in the Hospital is PAT tested annually by the designated Area Safety Officers. Any faulty equipment is logged and taken out of operation immediately. The inspection reports are logged and kept in the designated areas and copies sent to the Hospital Safety Officer. All repaired equipment must be retested and a new form created before returning to designated area.

8.8. **Magnetic Resonance Imaging (MRI):** MRI uses a very powerful magnetic field, which is always present within the scan room. The magnetic field is strong enough to cause certain objects to move at high speed if they are taken into the scan room. Metallic items such as watches, keys, jewellery, (including body piercing) and mobile phones should not be taken into the MRI. Do not move or change any equipment within the MRI room unless you have been instructed how to do this and the MRI unit staff are aware of what you are doing. It is a safety requirement that all staff/student personnel tell the area safety officer about any metal objects have in their body (e.g. pacemakers) so that an assessment of their safety can be made. There is a list of questions relating to entering the MRI Unit displayed in the Imaging Suite.

8 **GAS CYLINDERS**

8.1 All users of gas cylinders should familiarise themselves with the SOPS regarding the safe use of pressurised containers. A copy of the notes is available in each area where cylinders are housed. They comprise of a daily checklist and maintenance inspection procedures recommended by BOC as well as Safe Storage Guidelines for gas cylinders.
9 **SHARPS**

9.1 Plastics, such as syringes, should be regarded as sharps. Particular care must be taken when using needles or other sharps (e.g. scalpel blades). Needles should never be re-sheathed but removed from syringes using the mechanical needle remover on the lids of the sharps containers.

9.2 Never overfill Sharps Containment (yellow) or Glass (orange) bins. If they are full contact the safety officer for that area with regard to their renewal.

9.3 Broken glass must be swept up, never picked up, and placed in Glass bins for disposal.

10 **DISPOSAL**

10.1 **Chemicals**: These must be disposed of, stored and handled in accordance with the COSHH guidelines for that particular chemical. If you are not sure of the correct procedures, check the 'BDH Hazard Data Sheets' book or 'Fisons Safety Data Sheets' on computer.

10.2 **Faeces / urine**: Normal animal faeces and urine should be disposed of in a red (non clinical waste) Any potentially infectious faecal waste must be placed in a clinical waste bag disposal.

10.3 Any potentially infectious **solid** waste must be placed in a yellow clinical waste bag disposal. Any potentially infectious **liquid** waste should be autoclaved before disposal to the drain.

10.4 Any contaminated, non-disposable equipment must be placed in an appropriate disinfectant (e.g. Trigene), or autoclaved before normal cleaning.

11 **MANUAL HANDLING**

11.1 Assessments on all manual handling operations should be carried out to determine whether; the task could be avoided by using mechanical assistance; the risk could be reduced by altering the load, changing the task or changing the environment in which the task is carried out.

11.2 Manual handling tasks should also be related to the individual capability of the handler. When handling loads, spread your feet flat on the ground and keep the load close to your body. Avoid twisting, turning, stooping or stretching whilst carrying a load. Two people are required to lift dogs over 20kg
11.3 Before carrying out any of these procedures you should read the University short notes 'Assessment and Reduction of Risk in Manual Handling', these are available in each laboratory.

12 FUME HOODS

12.1 There a fume hood situated in the Oncology Laboratory, this hood is under negative pressure and exhaust is directly passed to the outside atmosphere. Consult the Safety Officer or a senior member of staff before using any of these hoods as they may be designated for a specific purpose. When handling hazardous chemicals in powder form, do so inside the hood with the fan turned off. Once your solution has been prepared, switch on the fan and clean any powder residue with a damp tissue. This should only be used for chemotherapeutic drug dispensing and under the supervision of an oncologist.

13 VDU’S/DSE’S

13.1 New legislation regarding the use of Visual Display Units (VDU’s) was implemented in January 2000. Within the Hospital there are many staff that, under this legislation, should be classed as "Users of Display Screen Equipment" (DSE). These workers, and others who regularly use VDU’s should familiarise themselves with the University Safety and Environment Service Web Site (www.gla.ac.uk/services/seps/computers/dsebook.html). This provides information regarding, training requirements, possible health effects of VDU’s, eye and eyesight tests and workstation assessment.

14 HOSPITAL LAUNDRY

14.1 The hospital laundry is classified into 2 main groups

1. Hospital Tunics/ Scrubs suites.

2. Kennel ward bedding.

All scrub suites and tunics are laundered externally by a commercial laundry company. Dirty laundry should be placed in the various laundry bins located throughout the hospital for collection by laundry staff.

14.2 No items other than from the Hospital wards are to be laundered in hospital laundry.
15 Security

15.1 It is essential that all external side doors be locked during/after working hours. All staff should be vigilant for the presence of any unauthorised persons, particularly outside working hours.

15.2 Anyone working outside normal hours, (8am - 7pm Monday to Friday) should inform security of their presence. It is the responsibility of supervisors to ensure that staff or students working in the hospital are adequately trained to ensure safety while working after hours and must approve such activity. Undergraduates are not permitted to work unsupervised within the Hospital unless their supervisor has granted permission after consultation with the Safety Officer responsible for the area where the work will be carried out.

16 Accidents and Illness

16.1 All accidents in the hospital areas must be detailed in the Accident Record Books kept in the Hospital Safety Officer’s office and must be notified to the University Safety Office on the appropriate form. These forms are available from the Nursing Station within the treatment area. First Aid boxes and eye wash stations are available throughout the hospital. In the event of a more serious accident seek First Aid advice. A list of qualified First Aiders is displayed on the notice boards in the Treatment Area, Case Reception Office and the Staff Social Area. If a First Aider is unavailable or if injury is potentially serious, the injured party should be transferred immediately to the Accident and Emergency unit at the Western Infirmary.

16.2 Incidents, whether or not they result in personal injury, and all infections or irritations which may have occurred as a result of exposure to agents in the Small Animal Hospital must be reported to a senior member of staff immediately.

16.3 People with known allergies have a duty of care to inform the relevant area safety officers and not to expose themselves to their allergens.

16.4 In the event of a major spill involving personnel within the Clinical area, general shower facilities are available in both the Male and Female changing rooms situated in the corridor on the first floor of the hospital.
18. **FIRE**

Fire is the most serious hazard in the Hospital, potentially affecting all areas, in particular those places with flammable solvents and electrical equipment. All staff must conform to the fire regulations. (http://www.gla.ac.uk/services/seps/firesafety.html)

**On Discovering a Fire**

18.1 Raise the alarm by operating/breaking glass of the nearest Fire Alarm Call Point.

18.2 A bell, siren or electronic sounder (depending on premises) will then sound continuously.

18.3 Evacuate the building

18.4 Proceed to designated assembly point.

**On Hearing a Warning of Fire**

18.5 Evacuate the building quickly and calmly.

18.6 Proceed to designated assembly point.

**On Both Occasions**

18.7 **DO NOT** delay your departure by collecting personal belongings.

18.8 Where possible close doors behind you.

18.9 **DO NOT** use lifts

18.10 **DO NOT** re – enter building until Fire Brigade Officer has stated it is safe to do so.

18.11 **DO NOT** wedge open smoke or fire doors.

18.12 **Keep exits clear at all times.**

**Do Not Fight Fire If:**

18.13 It is dangerous to do so.

18.14 You are on your own.

18.15 There is a possibility of your escape route being cut off by fire or smoke.

18.16 The fire continues to grow.
18.17 The fire is involving hazardous materials.

The number to be dialled in the event of fire is 2222; Animals must be left in the clinical areas.

All staff must ensure that they know the location of the fire fighting equipment. Familiarise yourself with the positions of fire blankets, fire extinguishers and fire escapes / exits as you will not have time in an emergency situation. If you have a query regarding fire safety consult the area Fire Safety Adviser. Details of the area Fire Safety Advisers are posted on the notice boards in the Hospital Ward Corridor, and Case Reception Office.

19. STUDENTS

Students must comply with the regulations in this document. Safety information is also detailed in the ‘Course Information’ booklets that accompany specific areas of the course of study. Additional information with regard to handling large animals is available in the ‘Farm Animal Protocols’ compiled by the Division of Animal Production and Public Health.

20. FIRE OFFICER

Sharon Smith ext. 5767
Deputy Fire Officer: Laura Neil ext. 7037

21. FIRST AIDERS

Pamela McComb ext. 5391
Gail Hunter ext. 3595
Lynn Derby ext. 5757
Sharon Smith ext. 5767
Lindsay Becket ext. 7019
Julie Hermit ext. 7267
Ian McNaught ext. 8210/0221
Ruth Wallace ext. 2257
Rachael Paterson ext. 7135/7034
Jennifer Armstrong ext. 7135/7034