



FACULTY OF MEDICINE AND HEALTH SCIENCES

BOB CHAMPION RESEARCH & EDUCATION BUILDING

MED BUILDING – UEA MAIN SITE

ELIZABETH FRY BUILDING

QUEENS BUILDING

EDITH CAVELL BUILDING

HEALTH AND SAFETY POLICY STATEMENT & CODE OF PRACTICE

Guide to Operation and Organisation

Key Information Table (*please complete all fields*) - see the end of this document for an example

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SECTION 1 - POLICY STATEMENT & CODE OF CONDUCT

FACULTY OF MEDICINE AND HEALTH SCIENCES (FMH) H&S POLICY – GENERAL STATEMENT

The Faculty upholds the University's policy which is:

- to comply with the Health and Safety at Work etc. Act, 1974 and other relevant statutory requirements;
- to provide control of the health and safety risks arising from our work activities;
- to consult with our employees on matters affecting their health and safety;
- to provide and maintain safe plant and equipment;
- to provide safe work places and safe means of access and egress
- to ensure safe handling and use of substances;
- to provide information, instruction and supervision for those at work;
- to ensure all undertaking university work are competent to do their tasks, and to give them training;
- to prevent accidents and cases of work-related ill health;
- to maintain safe and healthy working conditions;
- to seek continual improvement in its health and safety management systems and to match best practice standards within the university sector; and
- to review and revise this policy as necessary at regular intervals.

Further details of the UEA Policy and guidance can be found at:

<https://portal.uea.ac.uk/uss>

Prof D Edwards

EXPECTED CONDUCT OF ALL STAFF

All staff and research workers in the Faculty and its associated buildings should behave in a manner which avoids annoyance or inconvenience to others. The Faculty buildings are professional work environments; this fact should guide decisions about appropriate dress and behaviour and individual responsibilities to maintain a safe working environment.

- Smoking is prohibited in all buildings and within 5 meters of all external doors.
- Radios, computers and similar electronic devices should not be used in a manner that causes annoyance to other workers, students or visitors. The use of such equipment in open plan offices / study areas is not appropriate. Users must at all times be able to hear emergency alarms above any personal device/ear phones.
- Personal and communal work areas should be kept tidy so that cleaning staff have access to floors and surfaces. Research workers are responsible for keeping their own benches clean and tidy and for cleaning their own apparatus.
- Large personal items (including bicycles) should not be brought into buildings.
- On leaving UEA research and desk areas should be cleared. Apparatus cleaned / made safe and samples / paperwork should be disposed of or stored and logged appropriately in consultation with academic / laboratory supervisors.

CODE OF SAFETY CONDUCT

INTRODUCTION

This Code of Practice must be adhered to by all staff working within Faculty areas at UEA.

As part of the FMH commitment to Health and Safety, all UEA staff / visitors who intend to work in the Faculty buildings / facilities are required within TWO DAYS of arriving at UEA to have read and understood this 'Code of Practice'.

All staff working in Faculty buildings but NOT working in the laboratories or research facilities are required to read SECTION 1 of the Health and Safety Code of Practice only.

All staff working in Faculty buildings INCLUDING working in the laboratories or research facilities are required to read SECTION 1 AND SECTION 2 of the Health and Safety Code of Practice.

'The Declaration' in Appendix I must be completed as appropriate and returned to the school or faculty office (depending on line management) within two days of arrival, after which card access and key code access will be granted (an additional copy of The Declaration is printed on the back page of this booklet for tear off and completion).

For all staff working in laboratories or research facilities, the reading of this Code of Practice is not a replacement for the requirement for a laboratory Health and Safety Induction Training. All laboratory staff must receive Health and Safety Induction Training as soon as possible on arrival at the UEA. All staff should contact the Laboratory Manager to register for this induction. Any short term visitors who may be in the school for any greater than 1 week, must also read and sign the declaration in Appendix I having read this code of practice as appropriate to their work.

Further useful information with specific topics relevant to work in laboratories can be found on the Health & Safety intranet site: [ADD USS LINK](#)

HEALTH AND SAFETY RESPONSIBILITIES & MANAGEMENT

All staff should be aware of and make themselves familiar with the UEA Health and Safety Policy which can be found here: <https://intranet.uea.ac.uk/uss/intranet/Statement+of+Safety+Policy>

A schematic of the Lines of Responsibilities and Support for Health and Safety within the **FMH** can be found in Appendix II.

Management of Health & Safety is monitored and managed by the School and Faculty Health & Safety Committee overseen by the Dean of Faculty who has overall responsibility for Health and Safety with delegated responsibility to the Heads of School, the School Safety Officer and the BCRE and labs Facilities Managers (for contacts see Appendix IV). The safety rules laid out by this committee are applicable to all staff working within Faculty facilities regardless of their employer / employment structure.

However, as well as the UEA and Faculty responsibility to Health and Safety, all UEA Staff and students have a legal obligation (Health and Safety at Work Act 1974) to take reasonable care for the health and safety of themselves and of others who may be affected by their acts or omissions. Staff must also co-operate with the University in ensuring compliance with its legal obligations. The University expects all staff and students to take their responsibilities seriously and to co-operate with the safety measures that it adopts. Remember, foresight is better than hindsight. If you see something wrong, correct it and/or report it.

The UEA's obligations include:

- Undertaking / monitoring the provision of workplace risk assessments.
- Providing / ensuring adequate training.
- Formulating local rules (policies and procedures).
- Formulating emergency plans.
- Complying with statutory notifications.
- Supervising and monitoring safety (including health screening as appropriate).
- Setting up and monitoring safety committees.

PRINCIPLE INVESTIGATORS (PI) SUPERVISORY RESPONSIBILITIES AND THE LAW

Supervising Academics (Principle Investigators) must note that in law (Management of Health and Safety at Work Regulations 1999) it is the supervisor or instigator of any work who **takes personal legal responsibility** to ensure that work performed by their bidding is safe, that procedures are in line with appropriate regulatory and UEA local health and safety guidelines and that training is given to their staff appropriate to the work to be undertaken. The above legislation enables prosecution of organisations but also of individuals for health and safety offences. Detailed information on PI responsibility is found in the UEA Health & Safety Policy Document.

Although authority to act on matters of Health and Safety or authority to give training can be delegated to supervisors / post-doctoral researchers etc, the ultimate responsibility for complying with the Health and Safety law cannot be delegated. It is the PI's responsibility to ensure that any staff with delegated responsibility are competent and appropriately trained to do so and have clear guidelines (for more info on laboratory supervision see "Training & Supervision for Staff, Visitors or Students using Laboratory Space" in Section 2 below).

HEALTH AND SAFETY OF UEA EMPLOYEES / STUDENTS WORKING ON PREMISES OF ANOTHER EMPLOYER / COLLABORATOR

In all cases where a member of UEA staff or UEA students are to work on the premises of another employer, in any interdisciplinary arrangement, it is the responsibility of the PI or line manager to ensure that there are appropriate Health and Safety arrangements established. Where they are to work under the H&S management arrangements of the host, then the need to work under those arrangements should be agreed and documented between the school and the host. All UEA employees / students must still comply with the UEA H&S Policy requirement to report accidents and incidents under the UEA reporting arrangements to UEA University Safety Services (in addition to reporting the accidents/incidents to their hosts) and this should be documented in the written agreement.

DISCIPLINARY PROCEDURE FOR LACK OF COMPLIANCE WITH RULES:

The Faculty and Schools within it have the following procedures in place to ensure that all staff adhere to the UEA and FMH local rules laid out in this booklet. In the event of a member of staff who is found to be ignoring or not following the safety practices detailed the following cascade will be initiated:

- First a verbal warning should be issued either from a member of senior technical staff / facilities manager or their lab supervisor / PI.
- If a member of staff continues to ignore these rules then the member of staff is given a written warning from the Safety Officer which is copied in to their supervisor/PI and copied to the Head of School.
- If after two warnings the staff member still is ignoring rules then their access card will be deactivated with immediate effect. They will receive a further written missive once again copied to supervisor and to Head of School to inform them that their card has been deactivated and that they are no longer permitted access to university buildings. Their card will not be reinstated until such a time as they have had a personal meeting with the Head of School to discuss what they must do to comply with the rules. The Head of School will then inform their line manager when they feel satisfied that the rules are being adhered to and the member of staff is safe to work in the buildings or if any specific retraining is required.

UNIVERSITY SAFETY SERVICES (USS)

UEA Safety Services provides all staff and students at UEA with advice and guidance on safety. They have neither an executive nor an enforcement role.

USS is always available to answer any questions or queries relating to health and safety at work and actively encourage people to contact their services should they require guidance. Or visit Safety Services website at: <https://intranet.uea.ac.uk/uss/intranet> for safety advice, guidance and information.

Management, monitoring and enforcement of safe work practices relating to specific procedures is the responsibility of those, within the University, who are in charge of the work of students or of other staff (ie PI's). Safety Services provides advice to support this activity.

UEA SAFETY CONTACTS

Comprehensive information regarding health and safety contacts can be located on the USS Intranet. University Safety Services can always be contacted if you need further help or if you are unsure.

Also see sections below on 'Other specific Regulation / Controlled use' and the 'Out of hours emergency contact list' in Appendix IV.

EMERGENCY PROCEDURES

FIRE SAFETY

- **Sound the Alarm** - If you discover a fire, sound the alarm by striking the “break glass” on the nearest fire alarm point / strike box. These are found along all fire evacuation routes and in entrance areas to each floor and wing. You must ensure you are familiar with the location of fire alarm break points in the areas in which you work.
- **Ring Emergency Services and UEA Security** – If you detect any signs of fire in the building (smoke/flames), ring 999 immediately and give details of the location and extent of the fire including any special hazards if known, such as gas cylinders or radioactivity in the immediate vicinity of the fire. On vacating the building ring UEA security on 01603 592222 to ensure that any information given to emergency services regards the incident is also provided to UEA security.
- **Use Appropriate fire extinguisher** - If you are confident using the appropriate fire extinguisher or a fire blanket and if the fire is small you may tackle the fire but you **must not take any personal risk**. If the fire cannot be extinguished or if you do not feel confident to tackle it you must leave the building immediately. Fire extinguishers and/or blankets are placed strategically throughout buildings. Take time to familiarise yourself with their locations and note the extinguisher code (labels are displayed at each location). Please remember that electrical fires should be attacked using a CO₂ extinguisher. If in any doubt leave the fire-fighting to the emergency services.
- **Leave the Building** – If you hear the fire alarm you must leave the buildings immediately. If possible close all doors on exit and leave the building following the Green and White Emergency signs. Ensure you are familiar with those nearest your usual place(s) of work. Use the “fire exits”, these doors automatically release when the fire alarm is activated. DO NOT stop / wait to collect belongings.

DO NOT USE THE LIFTS FOR EVACUATION IN EVENT OF FIRE

Always follow the directions of fire wardens. They will be identified by wearing Yellow or Orange tabards. Do not re-enter buildings until told it is safe to do so.

Assembly points:

Staff from BCRE should assemble at the BCRE muster point on the grass to the back of the car park, towards the main vehicular entrance.

Staff in the Norwich Medical School Building (Main Site) should assemble to the rear of the West Car Park away from the building

Staff from ECB should assemble in the visitor’s car park.

EFB

Staff in Queen’s Building should assemble on the grass at the front of the building.

Fire Alarm Testing:

The fire alarms are tested as follows:

- MED, every Wednesday morning between 8.30 and 9am.
- BCRE every Thursday morning at 8.30am.
- Queen’s Building every Wednesday morning around 8am.
- EFB
- ECB on Friday mornings around 8am.

Intermittent alarms or alarm sounding for just a few seconds during this period can be ignored. However if the alarm continues at this time, the alarm must be assumed NOT to be a test and the buildings must be evacuated as normal:

Fire alarm	–	constant alarm sounds
Test	–	intermittent alarm sounds

ALL STAFF MUST READ APPENDIX III - Emergency and Fire Evacuation Plans

All staff will be required to undertake either UEA or NNUH (as appropriate) online fire training within their first 3 months of employment.

Additional useful fire precautions to take in and around your workplace:

Know at least two escape routes from your workplace to a FIRE EXIT.

Know the locations of ALL Telephones, Fire Extinguishers and Fire alarm strike points.

Know how to switch off gas and the electricity to equipment you use etc. (if time and safety allows).

Ensure you keep clutter and paperwork etc to a minimum

Ensure all fire exit routes remain clear from trolleys etc

DISABLED PERSONS AND FIRE:

Please seek advice and information from USS intranet site prior to using FMH buildings. If you are a wheelchair user or at any time during your employment or study period have restricted mobility and you need access to FMH buildings, you must inform the Faculty Manager and University Safety Services. A Personal Emergency Evacuation Plan (PEEP) will be prepared. In event of a fire alarm sounding you should follow instructions in your PEEP for exit (if there is no PEEP in place you should make your way to the nearest stairwell or refuge area for assistance with evacuation).

FIRST AID / ACCIDENTS

Please take time to make sure you are aware of how to contact a **First Aider**. Names, extension numbers and locations of first aiders are posted at prominent locations throughout buildings. All staff should familiarise themselves with locations of these contact lists.

In event of an injury to anyone at UEA you should call for help immediately unless the incident is minor.

- Location of First Aid Boxes – First Aid Boxes or strategically located around FMH buildings and the locations are highlighted on Fire and First Aid notices. Staff are to make themselves aware of their nearest.
- In an emergency call - Ambulance (999 AND telephone UEA Security x2222 (day or night) from any telephone.
- If Emergency (fire) alarms sound, do not attempt to move an injured person out of the building unless there is imminent danger. If it is safe to do so, stay with the injured person until help arrives. If you are **at all unsure** leave the building and inform the emergency services of the location of the injured person.
- All accidents (involving UEA or NNUH staff / visitors or other) must be reported by use of UEA accident / incident report forms (see USS

<https://intranet.uea.ac.uk/uss/intranet/safetysubjects/accidentillhealth>)

If an accident is not serious but after attendance by a UEA first aider further treatment is recommended, the person should go to their own GP (this should be the University Health Centre ONLY if they are registered with the doctors there) or the Norfolk and Norwich University Hospital Accident and Emergency Unit as appropriate.

If you use any item from a first aid box or if first aid stocks have been depleted and require replenishment, please contact the named person on the box. Please send an email as indicated on the first aid box if minimum requirements (list inside the first aid box) are not fulfilled.

ACCIDENTS AND HAZARDOUS INCIDENTS REPORTING

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (1995) require that records be kept by the university, of accidents that occur to staff, students or other persons on the University premises. All accidents, however minor, must be reported to Safety Services on an accident form available on the USS intranet. The line manager or supervisor of the person involved in the accident and/or a colleague involved in /witness to the accident should also complete the accident report form where possible. It is better to have duplicate forms than none; also different people may have a different perspective of events leading to the accident or incident. All serious accidents and dangerous occurrences must be reported to USS without delay. It is vital not to disturb the area where a serious accident/incident occurred until permission is given by the Director of Safety Services.

A hazardous incident is an unintended event that has the potential to cause personal injury, but has NOT done so on this occasion, e.g. slipping on an uneven surface, equipment malfunctions with the potential to cause harm etc. Any such event should be reported to University Safety Services (USS) and the Facilities Manager using a hazardous incident report form (see link to USS accident form above).

FAILURE OF MAINS SERVICES:

In the event of a power failure, flood, gas leak, mechanical breakdown, steam failure or other emergency you should:

- **Ensure your safety and that of other people in the building**, if the incident has the capacity to cause danger to building occupants, activate fire alarms (using break glass box) to evacuate the building.
- Safeguard experimental material as far as practicable or safe to do so.
- In the event of floods remember that there may also be electrical or radiation hazards. Warn people in laboratories on the floor/s below to safeguard papers and equipment. Do not attempt to move wet electrical equipment until it is disconnected from the mains.
- Urgently contact appropriate people - Inform Facilities Manager and dial Estates and Buildings x2121 giving details and location of problem. Failures out of hours see 'Out of Hours Contacts'. In any emergency contact Security on x2352 giving details of the problem.
- Use common sense, e.g.: if a refrigerator stops working transfer critical material to another.
- Only call out staff to real emergencies.

ACCESS AND VISITOR INFORMATION

ACCESS HOURS IN FACULTY BUILDINGS (including Out of Hours and lone working)

'Normal working hours': 07:00 to 19:00 Monday – Friday (excluding customary and statutory holidays, as listed on the University Portal)

'Limited Access Hours': 06:00 to 07:00 & 19:00 to 22:00 Monday–Friday & 06:00 to 22:00 Saturday, Sunday and university holidays.

If you have to work in FMH buildings during limited access hours, please inform your supervisor. Access will be authorised by campus card only and you **MUST** sign-in and sign-out at appropriate log books at entrance to lab or office areas detailing the room locations in which you will be working.

Lone Working is defined as working when no other person is working within earshot / line of sight in the same room / laboratory. *Lone working is discouraged at all times*, where possible always work within earshot/line of sight of a colleague. Lone working is more likely to occur during limited access hours but can happen at any time (lunch breaks, seminars, using equipment in other rooms, etc). One to one meetings with students should be scheduled within standard working hours wherever possible; where this cannot be avoided, another member of staff should be aware of the meeting taking place.

The lone working and out of hours risk assessment in Laboratory Areas

Any Laboratory work involving lone working or out of hours work must be restricted to familiar operations that have been assessed as having minimal risk. An 'Out of Hours Risk Assessment' must be completed and must take into account that as a lone worker you have increased vulnerability when the unexpected occurs.

- Your supervisor must be consulted as to what work is appropriate to be completed while lone working.
- Lone working should only be carried out when there are no reasonable alternatives.
- If working alone in the lab then a 'buddy system' should be employed wherever reasonably practicable (i.e. ensure someone knows where you are and when you are expected to return/ finish).
- All laboratory lone working must be subject to an 'Out of Hours Risk Assessment' authorised by the Principle Investigator responsible for Safety of the project and read and signed by all staff working out of hours or alone.

Working between 22:00 - 06:00 in laboratories should be considered as strictly forbidden.

However, if circumstances dictate that work is **UNAVOIDABLE** between the hours of 22:00 and 06:00, the individual concerned should discuss the matter beforehand with their supervisor and the School Safety Officer (SSO) and obtain express permission. A risk assessment must be written and approved before the work is carried out. Campus cards will not give access to laboratory doors between these hours unless permission has been granted by the SSO.

UNDERGRADUATES IN FACULTY BUILDINGS

Undergraduate and postgraduate taught students are allowed access to open access areas of university buildings during 'normal working hours'. In specific circumstances students may be given access by use of their Campus Card, to specific areas of UEA teaching buildings out of hours (eg. 24 hours access to the MED building for use of computing facilities, and the Clinical Skills Resource Area in the BCRE). Undergraduates must not access research laboratories out of hours and must be supervised at all times.

All undergraduates in the buildings must be authorised to be present by a senior member of staff and that member of staff must ensure that all local rules and safety procedures are observed at all times.

OUT OF HOURS EMERGENCY CONTACT LISTS

For a current list of Out of Hours Emergency Contacts please see Appendix IV (NB some contact numbers are omitted for security, however all are held by security staff at The Lodge, x2352 or x2222). For problems with individual pieces of equipment the user or owner should be contacted as indicated on the '*Apparatus in use beyond normal hours*' card attached to the equipment. In the event of a general incident (e.g.: minor flood or power loss) or any laboratory based emergency refer to the "Need Help Out of Hours" lists displayed. For wide-spread incidents requiring fast response notify The Lodge x2352 or x2222 to initiate their call-out procedure.

Where a radiation contamination hazard is suspected, immediately contact the lodge and the radiation protection officer / USS must be called. You must contact someone and not leave this unattended.

Out of Hours lists are for emergencies that require immediate action, only call these numbers in an emergency.

BUILDING SECURITY

It is the responsibility of all staff to ensure building security is maintained at all times.

Security: During 'Normal Access', main entrance doors give access to UEA and NNUH students and staff. All other doors have restricted access via card swipe at all times. During limited access only staff with limited access rights will be able to access BCRE buildings.

During limited access periods all persons already in or entering into the buildings must enter their name and location in the building, date and sign in time, in the limited access log book. These are situated just inside the main entrance doors. These records are used so that emergency services would have a record of staff in the building in the event of an emergency out of hours and so failure to record in these logs accurately could put lives at risk. During limited access periods please ensure that other people do not 'tailgate' you through entrance doors to gain access to the buildings. If you see ANYTHING suspicious in or out of hours please report it immediately to security on x2352. Please challenge anyone you do not recognise and in return please don't take offence if anyone challenges you in the buildings. If you are still in doubt please contact security.

Rooms with key locks should be locked at any time they are not occupied, especially out of hours.

NEVER exit through fire exit routes leaving unsecured doors behind you. If you ever come across an unsecured exit out of hours you must report this immediately to security.

GENERAL SAFETY INFORMATION

ELECTRICAL EQUIPMENT AND WIRING SAFETY

For UEA electrical regulations please see USS web pages. Electrical wiring should not be altered. Changing of fuses / plugs can be undertaken by any PAT trained staff, never do this yourself. Any other electrical equipment maintenance or repairs can only be carried out by a trained and assessed electrically competent person (see Estates/Facilities Manager to organise this). Any work on wired electrical supplies installed in buildings must be undertaken only by qualified contractors on site with approval from UEA EST or Facilities Management Contractor.

Every piece of portable electrical equipment should support an electrical test sticker with an expiry date, it is the user's responsibility to check this and alert your technician/safety officer if you find an out of date piece of equipment. Any un-tested or out of date equipment should not be used. This also applies to any privately owned portable electrical equipment including laptops, radios etc.

Electrical Equipment Left on Overnight

It is the user's responsibility to ensure any electrical equipment (including PCs, analytical equipment, fridges / freezers etc) which is to be left on overnight is safe and suitable for the task and that the area surrounding the item is free from combustible materials. All equipment left on overnight must display details of an appropriate contact and actions to take in the event of failure.

MANUAL HANDLING

All persons expected to undertake manual handling operations during their work should take a training course on the correct manual handling technique. Manual handling courses are run by USS and you should contact them for training dates. Appropriate lifting equipment should be utilised when the appropriate training has been completed. Staff and students required to perform regular manual handling in the workplace should attend a manual handler's assessor's course, contact USS for booking instructions. Please note that trained assistance (the University portering department or other external professional removal companies) may be required to move heavy / awkward pieces of equipment.

PREGNANCY

If you are pregnant (or are planning to become pregnant), staff/visitors to UEA must speak to Human Resources or PGR students to the PGR office. A workplace risk assessment must be undertaken. In many workplaces at UEA there are risks which may affect the health and safety of new and expectant mothers and their child. Working conditions normally considered acceptable may require adjustment during pregnancy or while breastfeeding. The law requires employers to assess risks to new & expectant mothers in the workplace. See: <https://intranet.uea.ac.uk/hr/intranet/policies/maternity>

DISPLAY SCREEN EQUIPMENT (DSE) TRAINING

DSE training includes essential advice for all staff using visual display units (e.g. computers/monitors) and keyboards on how to avoid eyestrain and muscular problems when using DSE. This training is now available as a web-based course via Blackboard. All regular DSE users should complete this training. Please e-mail [USS](#) in order to be enrolled on this course.

TRAVEL FOR WORK / STUDIES WITHIN THE UK OR ABROAD

Any work carried out by any MED staff or post graduate students for the purposes of teaching, research or other activities while representing the institution offsite is considered as 'Fieldwork' under the 'UEA Advice on Health and Safety in Fieldwork'. Activities as diverse as attendance at conferences and recruitment fairs, visiting collaborators, undertaking social science interviews or laboratory based research, as well as activities more traditionally associated with the term fieldwork, such as survey/collection work carried out by geologists or biologists, must be registered with and authorised by the school. See **Appendix V** for further information. Staff and line managers must note, where any 'UEA' activities are carried out at any other institute / offsite, any reporting (including accident / incident or sickness recording) must be dual reported at both the visiting institute **and via the usual UEA routes**.

DRIVING FOR WORK

If you intend to use a car for work related trips (other than coming to and from work) you must ensure you are adequately covered by your insurance policy. You may find your normal vehicle insurance does not cover you for work related transport. All staff are to adhere to the Faculty Driving for Work Policy and present their vehicle documents prior to undertaking the journey. INSERT POLICY DOCUMENT LINK. The expenses you can claim for fuel for work related car use includes an amount for insurance, Cost of insurance premiums are not covered. See: <https://intranet.uea.ac.uk/uss/intranet/safetysubjects/driving> for more information. Claims will not be honoured unless prior proof of valid insurance and MOT has been registered in accordance with the Faculty policy.

PROCUREMENT PROCESSES AT UEA

All purchases for work related items require AUTHORISATION and a relevant GRANT CODE. Your PI will be able to direct you to the person responsible for this in your area, or instigate you as an authorised user for the e-procurement system.

Please do not order and pay personally for items from shops or over the internet with the intention of claiming the funds back. It is not possible to purchase items for work from e bay or other auction sites.

Many suppliers provide preferential pricing for universities. If you wish to find out more information contact a member of secretarial or technical, admin or finance staff who will be able to point you in the right direction. Always ask for quotes for larger items, list prices can nearly always be negotiated.

The UEA has purchasing regulations relating to large purchases. Purchases for items anything over £5k per item come under these rules. Please see Finance website for more information: (<https://intranet.uea.ac.uk/fin/purchasing>)

Large Equipment Purchasing

All large equipment purchases must be discussed with the Facilities Manager PRIOR to purchase to ensure there is sufficient space, services, power, ventilation, light etc.

SECTION 2- FACULTY LABORATORY SAFETY

GENERAL LAB SAFETY INFORMATION

INTRODUCTION

In any scientific establishment safety is an important issue. This Code of Practice deals with aspects of safety most likely to be found in this Faculty and its buildings. It is extremely important that you read and understand this information, make yourself aware of the risks associated with your work and ensure that you use appropriate protective equipment whenever necessary. It is your responsibility to work safely.

In accordance with health & safety law primary responsibility for health and safety lies with those who create the risks and those who work with them. This means that in the lab environment, principle investigators have primary responsibility for the safekeeping of the staff, students or visitors who work in their laboratories in an academic capacity, including for the undergraduate students they teach or during short term projects in the labs. This responsibility includes ensuring that appropriate safety paperwork is in place (including CoSHH, GM, Microbiological, Human tissues or other appropriate risk assessments & registrations relevant to the work ongoing in the lab).

BEFORE STARTING WORK in LABORATORIES

It is essential that you:

- Undertake a laboratory safety induction – contact the appropriate Laboratory Manager / co-ordinator
- Read and sign relevant Risk assessment forms and CoSHH forms with your supervisor. If there are no risk assessments / CoSHH already in place for the work you will be doing; you will need to write these.
- Ensure you are aware of any special risks associated with the work you are going to do.
- Read MED School Health and Safety Code of Practice sections 1 & 2 and sign declaration

TRAINING & SUPERVISION FOR STAFF, VISITORS OR STUDENTS USING LABORATORY SPACE

All users of laboratory space must receive training and/or supervision. It is the line manager's responsibility to ensure that training is given appropriate to the work to be undertaken prior to any person working in the laboratory environment. Supervision must be provided either directly by the supervisor or by delegation to a suitably experienced member of laboratory staff. Levels of direct

supervision must be appropriate to the skills and experience of the worker however supervisors must not act on assumed competence (ie it is not sufficient to rely on the assumption that laboratory personnel know and follow the laboratory safety regulations and procedures).

CONSUMABLES COSTS FOR LAB ACTIVE STAFF (BCRE Specific)

The wet laboratories in BCRE will be stocked with basic laboratory consumables requirements from a communal budget. A list of consumables items included in this provision will be available from the Facilities Manager. All BCRE laboratory researchers will be expected to contribute on a per capita basis to fund the communal budget. It is the PI's responsibilities to inform the facilities manager of any changes in lab active capita numbers within their lab group. The capita costs charged will be a set monthly figure. To ensure that consumables costs are met by the capita income, monthly charges will be subject to annual review by the Facilities Manager. Information on current monthly costs can be requested from the Facilities Manager at any time. Staff using wet lab facilities in other buildings should speak with their laboratory manager to identify specific consumables procurement policies.

PERSONAL PROTECTIVE EQUIPMENT (PPE)

Spills and splashes occur even during the most conscientious of movements / activities, so the School insists on the wearing of laboratory coats, eye and hand protection where defined by risk assessment and appropriate footwear / clothing to ensure adequate protection of staff, students or visitors at all times in labs. It is the responsibility of all staff or students to wear appropriate attire and PPE appropriate to their work task and as per detailed in any risk assessments relevant to the tasks performed.

Labcoats

Howie style (high neck, cross breasted) laboratory coats MUST be worn when working in all Class 2 laboratories. The lab coat should be fastened at all times and sleeves rolled down to protect arms. Laundry arrangements are in place, labcoats must not be taken home to wash. Leave labcoats for laundry in the labelled box *CHECK POCKETS ARE ENTIRELY EMPTY BEFORE SENDING ANY COAT TO LAUNDRY* Your laboratory coat must be removed on leaving the lab. **Laboratory coats must not be worn in any 'non laboratory' environments.**

In BCRE: Labcoats must be worn at all times beyond the 'main entrance corridor lobby' where the main labcoat pegs are located which denotes the CL2 facilities boundary (on entering the corridor before turning right or left down the lab corridors or entering the main lab, labcoats must be worn). There are labcoat hooks available near each stairwell where, if users need to use stairwell access to floor 0, labcoats should be left. These are not appropriate storage locations for labcoats as you must wear labcoats to access these points unless access is gained from stairwells.

There are coloured labcoats provided for use in specific facilities (Tissue culture (light blue), molecular diagnostics (grey), clean room (bottle green) and CL2+ (hospital blue)). When using these facilities white labcoats must be taken off and left on pegs whilst coloured labcoats are in use. Coloured labcoats provided are communal use coats for the specific facilities/lab areas and must not be taken out of specified areas.

Due to limited labcoat storage facilities at the main lab entrance, staff/students who are sporadic users of lab facilities should use 'visitor' (royal blue) labcoats provided. Nothing should be left in pockets of

visitor labcoats, these are regularly laundered, however if anything is ever spilt on these they should be put out for laundering immediately.

Gloves

When working at the bench and undertaking laboratory work, appropriate gloves must be worn. Gloves must NEVER be worn to open any door handles. Gloves MUST be removed before leaving the laboratory area.

Users should be aware some glove types are not protective against phenol, chloroform or other chemicals and ALL glove materials have a 'break through' time. Gloves should be changed regularly or if spills on them occur. Further guidance and advice on selection of the best glove type can be found on MSDS (material safety data sheets) applicable to the chemicals being used. Glove type information specific to procedures in the labs should be included in your CoSHH risk assessment. When wearing gloves remember not to touch your face / personal items (mobile phones) etc.

Latex glove policy: Powdered latex gloves are forbidden in the University. Use of non-powdered latex gloves may be considered *but* must be fully risk assessed, see facilities manager.

Eye / face protection

There are various reasons for the use of Protective glasses / visors, this may include to protect from an eye irritant, UV protection, impact protection or splash protection. Some eye protection is suitable for chemical splashes only and is not impact resistant. Please ensure you have appropriate safety spectacles and a visor available for use where appropriate. You should seek assistance in obtaining eye protection from your technician. You should ensure you have eye and face protection immediately available before commencing work in the laboratory. All users must ensure they understand WHY as well as WHEN face protection must be worn as this may define the type of protection necessary. Eye protection must be worn when:

- Working with toxics, strong acids / alkalis – Chemical protectant glasses or goggles dependent on procedures involved and level of splash risk defined by risk assessment.
- Using UV light - UV protectant visor
- Use of Cryogenics eg liquid nitrogen, dry ice – impact resistant visor or glasses dependent on level of risk and volumes involved defined by risk assessment.
- Whenever chemical splashes to eyes could occur – chemical protectant glasses, goggles or visor dependent on procedures involved and level of splash risk defined by risk assessment.

This will cover the majority of activities in the laboratory. Eye wash stations are available in laboratory areas, lab staff should familiarise themselves with their location.

Note: If you wear contact lenses, be aware that these carry particular dangers. Chemicals splashed in the eye can quickly move behind the lens by capillary action and be trapped behind the lens against the cornea and this prevents effective washing.

Personal Attire

Long hair should be tied back in the laboratory. Footwear which encloses and protects the foot should be worn at all times in the laboratories; sandals and open toed footwear must never be worn in labs by laboratory staff. Clothing with long tassels / ties must be avoided.

HAZARDOUS SUBSTANCES / EQUIPMENT AND RISK ASSESSMENTS

CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH (COSHH)

All work with hazardous substances is covered by the Control of Substances Hazardous to Health Regulations (1999) (COSHH). The COSHH regulations cover the assessment of risk, prevention and control of exposure to substances hazardous to health. A substance 'hazardous to health' is any substance (solid, liquid, gas, fume, vapour) or biological agent that can present a hazard to health through being absorbed, injected, inhaled or ingested. The main objectives of the COSHH regulations are to reduce accidents and occupational ill health by ensuring that all use of these substances are adequately and accurately risk assessed and to ensure that control measures are put in place to protect those working with or those who could be exposed to these substances.

The Faculty has in place a formal risk assessment procedures for CoSHH, it is the responsibility of all lab staff to ensure that, for each procedure performed which involves any hazardous substance, an associated CoSHH risk assessment has been completed. COSHH assessments must be prepared by the work supervisor and the laboratory staff and the detail should be agreed by all. The formal record of the COSHH Assessment must be compiled on the most up to date version of the COSHH form available from the appropriate Facilities / Laboratory Manager. The completed form must then be authorised by the PI. Each lab group must have their own CoSHH file / database where all of the groups CoSHH forms are held. Each CoSHH form must have a unique number (for BCRE labs in the format of **/###, where * is PI initials and # shows sequential numbers starting from 001). The official lab copy must be held in a lab safety folder which must be fully accessible to all lab members. Where CoSHH forms are found to be lacking or where new procedures are planned and CoSHH forms have not previously been held, work must not be started until a CoSHH assessment has been completed and authorised by the PI. Individual workers must read and once understood, sign their name & date on all CoSHH forms relevant to their work (workers must also read any additional information from any links listed in the CoSHH form). CoSHH risk assessments must be reviewed every 2 years or sooner if any changes to procedures are made.

The School Safety Officer or Facilities Manager may perform spot checks at any time to ensure CoSHH risk assessments are held and are regularly reviewed for all applicable procedures.

OTHER SPECIFIC REGISTRATIONS / CONTROLLED USE:

The university is bound by legal requirements to register or control use of some other specific potentially hazardous substances / organisms used in the labs. These include:

- Genetically Modified Organisms
- Human Cells, Tissues, Body Fluids & venepuncture
- Microbiological organisms
- Radioisotopes
- Drug Precursors
- Mutagens, Teratogens or Carcinogens

Specific information or UEA local rules or registration forms for use of all of the above can be found on the UEA USS web pages or local web portals (for more information please contact your technician, appropriate laboratory manager or USS direct).

Please be aware that NO GMO's, Microbiological organisms, Human tissues or radioactive substances may be brought on site without the necessary risk assessments and related paperwork in place. To do so is an offence. Procedures to put this paperwork in place can take up to 8 weeks post submission for

review, so please ensure that you speak with your Line Manager, the Facilities Manager or USS in plenty of time if you plan to work with these.

The following UEA Safety Officers are in post to assist all staff working with the following controlled substances / organisms and can be contacted for assistance / further information:

Genetic Modification Safety Officer	Dr Jonathan Todd	Jonathan.Todd@uea.ac.uk
Human Tissues Safety Officer	Dr Mark Williams	M.R.Williams@uea.ac.uk
Microbiological Safety Officer	Dr Jonathan Todd	Jonathan.Todd@uea.ac.uk
Radiation Safety Technician (USS)	Ms Amy Lyall	A.Lyall@uea.ac.uk

Please take time to familiarise yourself with all the relevant rules for your experiments.

USE OF FLAMMABLE SOLVENTS AND FLAMMABLE STORAGE LIMITATIONS (DSEAR)

There are regulations surrounding the use and storage of flammable solvents in laboratories, these are called DSEAR (Dangerous Substances and Explosive Atmospheres Regulations 2005). The aim of these is to raise awareness of the dangers of having too great a volume of flammables stored and to ensure stored and in use flammables in the lab are risk assessed (see USS intranet pages for more information). This does not require individuals to prepare an additional risk assessment but the DSEAR regulations must be considered when preparing CoSHH for any procedures in which flammables are used and should include risks associated with storage of flammables.

Research workers are subject to limits on storage of 500ml of each flammable solvent on their lab bench. There is solvent storage space available in external chemical stores so that large stocks of solvents are not kept in the labs. In order to transport stocks of flammable solvents around UEA buildings ensure you use appropriate secondary containment. Any decanting of flammable solvents from storage vessels into working bottles must be performed in a fume hood.

TRANSPORTATION OF SAMPLES ETC WITHIN AND OUTSIDE OF UEA

Transporting or Shipping Chemicals & Dangerous Substances outside of UEA

There is often the need for staff to arrange for hazardous material to be moved around campus or shipped within the UK or abroad. Never assume the legal boundaries as even samples that seem innocuous are often still classified by law as 'dangerous goods' and must be packed and documented by a suitably trained person. A shipping technician will classify your shipment and complete the appropriate paperwork. For more information on UEA's shipping rules and trained individuals please see [James Goillau](#) in the BCRE or refer to information on the science goods office website: <https://intranet.uea.ac.uk/sci/goodsoffice/parcels>.

Transporting chemicals, samples or any dangerous goods in your car on public roads may be illegal. Under no circumstances must any chemical or sample be removed from or sent away from BCRE unless a trained shipping technician has authorised it.

Transporting Experimental Equipment, Samples & Chemicals around the BMRC, BCRE and NRP

Transportation of samples and solutions between labs / schools / facilities on the NRP should be kept to a minimum where possible; equipment should be made available within labs where practicable to avoid unnecessary transport and where unavoidable the following practices must be followed:

Double containment practise: During transportation, all items must be carried within a suitable secondary container e.g. clip lid box or bottle carrier to increase safety. If the contents are liquid, absorbent material should be placed between the primary and secondary containers. Consider using equipment such as trolleys and carriers to reduce risk of drops and spills. Staff should also be aware of the need to disguise clinical samples and maintain security of source identity of samples as necessary.

Transportation Risk Assessment: A specific Transportation Risk Assessment is mandatory for all movement. Contact senior technical staff for a template risk assessment for transportation. All staff members of each group who transport items should read and sign the risk assessment, which should outline guidelines for safe transportation as well as spillage procedures [See NRP transportation SOP].

SPILLS PROCEDURES

It is important that all staff ensure they are aware of the location of the eyewash station, emergency shower, first aid kit, spill kit and fire extinguishers nearest to their usual work locations.

All working risk assessments for lab activities should include a spill procedure. Anticipate the possibility of a spill occurring and take sensible precautions. Where appropriate use double containment / spill catchment trays. Any spill kit must contain appropriate PPE and absorbent materials to contain any spread.

In the event of a Chemical Spill:

Assess the risk remembering always to put safety first. Summon help if appropriate but keep bystanders away from the area and if necessary activate a fire alarm to evacuate the building. In all cases where a spill results in personal contamination, unless detailed otherwise in risk assessments, wash with copious water and summon help. If it is safe to do so act quickly to contain the spill by donning the protective equipment and lying pads, booms and / or granules over the spill. Clean up the spill using the chemical spill kit contents and carefully place into a waste bag and label it for disposal. **Follow the relevant CoSHH forms regarding 'what to do in the event of a spill'.**

After any spill, complete an **Incident Report Form** (see USS website) and report the incident immediately to the appropriate Laboratory Manager and your Supervisor. After every spill incident, it is likely the spill kit will need to be replenished; it is the responsibility of whoever uses the spill kit to ensure technical support staff are aware of what has been used.

Some hazardous incidents are reportable to the Health and Safety Executive and so reporting the spill is important as the UEA may have a legal obligation to report to HSE.

SPECIALIST EQUIPMENT / PROCEDURAL HAZARDS

Where specialised equipment is used there may be specific associated hazards. It is each individual's responsibilities to be aware of the specific hazards associated with their work. Pl's / senior lab staff or individual technicians will identify and where necessary deliver training in specific areas relevant to equipment available in that facility. The following specific equipment/procedures are covered individually in more detail below:

- Special instructions for handling cryogenes
- Air Flow Safety Equipment
- Autoclaves & pressure systems regulations
- Use of Naked Flames in Laboratories

- Use of Compressed Gases
- Electrophoresis Safety
- Microwave Ovens Use in Laboratories
- Needle-stick Injury and Sharps
- Uv/sonicator/ centrifuges

Special instructions for handling cryogenics

If groups use liquid nitrogen or dry ice (solid CO₂) a risk assessment/CoSHH must be in place and PI's must ensure that all users understand the risks. Only use containers that have been specifically designed for use with cryogenic substances. Generic safety sheets on use of cryogenics must be referred to and all staff must have read these.

The main risks associated with use of cryogenics are from cold burns or asphyxiation from gases evolved from liquid or solid cryogenic substances (particularly nitrogen gas from liquid nitrogen where small volumes of liquid vaporise to give large volumes of gas).

When dispensing and working with liquid nitrogen dry insulated non-absorbent gloves, laboratory coat, adequate foot protection and face/eye protection must be worn (be aware that vials stored in liquid nitrogen can explode on removal from storage so eye protection is extremely important AT ALL TIMES). Ensure a secondary container is used when first removing vials from liquid nitrogen.

In the event of cold burns - Remove any restrictive clothing but not any that is frozen to the tissue. Flush area with tepid water (not above 40°C) to return tissue to normal body temperature. **DO NOT** apply any direct heat or rub affected area. Cover with loose, sterile dressing. All burns must be referred to a medical practitioner.

DO NOT allow cryogenic substances to vaporize in enclosed areas (including fridges, cold rooms, sealed rooms etc) Cryogenic substances must be used or stored in well-ventilated areas. Wherever larger volumes are stored there must be oxygen-monitoring devices in place. Only trained individuals must transport liquid nitrogen. Never travel in a lift with liquid nitrogen – a key may be required to lock off lifts to facilitate movement of large volumes of liquid N₂ between floors.

In the event of suspected asphyxia – DO NOT enter the affected area alone. If someone becomes dizzy or loses consciousness while you are there, move them and yourself to a well-ventilated area immediately. Obtain medical assistance.

IN THE EVENT OF LARGE SPILLAGE OF LIQUID NITROGEN – OPERATE NEAREST FIRE ALARM POINT. EVACUATE AREA IMMEDIATELY, WARN PEOPLE OF AFFECTED AREA.

Air Flow Safety Equipment – Fume Hoods & Safety Cabinets:

In any type of air cabinet, users must remember to work tidily, a full or congested cabinet will provide less protection than expected. Air flow can be interrupted by people standing or walking close behind you while you work. Ensure the shield/door of the hood is pulled down to the indicated level before you start work. You must not lean into any fume / MSC hood. All fume hoods or MSC cabinets used in class 2 laboratories must be tested and serviced regularly (frequency is dependent on type of use and cabinet, please check with technical staff).

Fume-hoods of different classes (class I, II or III) are designed to provide different levels of protection to the user against hazards from toxic, dangerous or obnoxious materials by dragging airflow away from the user and so preventing harmful vapours being inhaled or otherwise ingested. Ensure that the

class rating of the fume cupboard you intend to use is appropriate for the nature of the chemicals being used. (All fume hoods in BCRE are class I).

Microbiological Safety Cabinets (MSC's) provide a similar function but dependent on class of MSC (class I, II or III) will protect not only the user but will also protect the work from contamination from the user or from external contamination. Users must ensure the unit being used is appropriate for the work planned and that adequate protection is provided. (All MSC's in BCRE are Class II). If in doubt about appropriate use speak to technical staff.

Laminar flow cabinets provide work protection only, the flow of clean air is from the back of the cabinet forwards over the work. A laminar flow cabinet offers no user protection.

NB. Use of naked flames should be avoided in any air flow hood/cabinet due to disruption of airflow and flammability of filters.

Autoclaves & Pressure Systems Regulations

All autoclaves come under the HSE Pressure Equipment Regulations 1999 which states that all pressure systems must be regularly serviced and pressure vessel tested by a trained engineer. If you have any autoclave / pressure cooker in labs, this must be registered with the appropriate Laboratory / Facilities Manager and testing must be performed. Autoclaves are potentially dangerous instruments. All staff using autoclaves or working in the close proximity of autoclaves must have received documented training in safe use of autoclaves.

Use of Naked Flames in Laboratories

In all situations where reasonably practicable, an alternative to use of naked flames will be used. However whilst use of naked flame burners in laboratories must be minimised, there may still be need for use of naked flame burners (individual small gas cylinder naked flame bunsen style burners) for bacterial work to provide an as close to sterile environment as possible. If use of a naked flame is necessary, it must be supported by a written risk assessment. The risk assessment should highlight the following recommendations:

- A designated area must be marked and care taken to position this away from building fire detectors.
- Reduce clutter in designated area, no flammable liquids or carbonaceous materials (wood, paper etc)
- Appropriate personal protective equipment must be worn at all times, to include labcoat, suitable gloves (heat resistant gloves in the event of holding glass to be warmed), eye protection to be used at all times.
- All equipment (burners and cylinders) must be in good working order & be visually inspected on every use.
- Pressurised cylinders must be no more than one year old or have been fully inspected and tested within the past 12 months & stored in a labelled & ventilated flammable cabinet when not in use.
- All staff must be aware of first aid principles in case of burns. All heat burns wherever possible must be immediately cooled under running water FOR AT LEAST 20 MINS.

Use of Compressed gases

It is important that compressed gases are used and handled correctly. All use of compressed gases must follow procedures defined by written risk assessments. Cylinders must always be properly secured by bench clamps or other device. Ensure the cylinder is located so that the valve can be isolated (turned on/off) easily in an emergency. Always transport cylinders on purpose made trolleys. When transporting in lifts cylinders must be moved unaccompanied with appropriate measures in place to prevent anyone else travelling with the cylinder. Regulators are only authorised for use up to 5 years after manufacture. This date must be displayed on the cylinder and regulators must not be

used after expiry. Please do not attempt to move or connect gas cylinders unless you have received documented training from a suitably experienced technician or member of lab staff. All users of gas cylinders must read the advice given on the UEA USS intranet prior to use (under 'Compressed Gasses and Pressure Systems').

Electrophoresis Safety

Due to the nature of electrophoresis and the use of volumes of liquid and high voltage electricity, electrophoresis carries its own specific risks in the laboratory. Precautions for safely operating electrophoresis apparatus and to prevent electrical shock during use are described on the H&S page 'Electrophoresis Safety' and in local rules. All users must read this advice. Care should be taken to ensure the gel running equipment and the electrical current supply remain as detached as possible, preferably keeping the power supply on a shelf above the gel running equipment ensuring that any leaks cannot affect the electrical power. Each group must have their own CoSHH risk assessment for running of electrophoresis gels.

Microwave Oven Use in Laboratories

All microwave oven users should read the 'Microwave Oven Safety' guidance provided on the H&S website or in local safety documentation. Items placed in microwave ovens **MUST ALWAYS** be covered (lightly – not sealed). Heat resistant gloves and eye protection must be used when handling items from the oven. Be aware of risk of 'superheating' where apparently non-boiling liquid can be removed from a microwave but when the container is moved it 'boils' violently causing potential splashing of boiling hot liquid. Microwave ovens used in labs should be tested annually for microwave leakage.

Needle-stick Injury and Sharps

Providing you are following safe working practises, the chance of a needle-stick injury should be highly unlikely, remember prevention is always better than cure! As such:

- Treat any procedure where you may come into contact with blood or body fluids as high risk.
- Use appropriate personal protective equipment e.g. needle resistant gloves. Any broken exposed skin must be protected with a waterproof dressing prior to commencing work.
- NEVER re-sheath needles.

Ensure you are aware of where to seek advice should exposure occur, and if it does;

- Flush the wound under running water whilst encouraging bleeding (do not suck the wound).
- Cover damaged area of skin with a waterproof dressing.
- Report the incident to your supervisor and on an accident report form to USS including what the needle may have come into contact with prior to incident.
- Where considered appropriate, contact UEA's Occupational Health services for an exposure assessment to be undertaken. ***Treatment or follow up bloods may be required.***

LABORATORY WASTE

LABORATORY WASTE PROCEDURES

Please see sections below for the disposal procedures of many types of laboratory waste. Where possible seek out more detailed local rules such as BCRE's "Waste & You" SOP or BIO/BMRC's "Code of Practice". Please contact a member of the technical support staff with any disposal queries.

Hazardous / Toxic and Chemical Waste

Disposal of all chemical waste is controlled by the Environmental Protection Act 1990. The producer of the waste, be it a member of staff or a student, has the initial responsibility for providing accurate information about the chemical waste they have produced and ensuring its safe disposal. Waste products and chemicals must be fully documented before being passed for eventual disposal by a licensed disposal company.

Where the waste is no longer in its original container the user must ensure the container meets the minimum UN standards to contain the chemical and is in good condition. The container must be appropriately labelled displaying the chemical name, creator's name and stating the primary and secondary hazards (GHS hazard pictograms are preferred). Containers should not be filled to more than 90% of their total volume.

Some facilities (such as BCRE & BMRC) provide containers for communal waste disposal. Please consult local rules regarding how to safely utilise this function.

Please note that it is not acceptable to allow chemical waste to build up in laboratories or to store it in fume hoods for extended periods.

Liquid Waste via Sinks / Drains

The Local Authority periodically monitors the UEA's effluent. NEVER put chemical waste into the mains drainage unless you've been given permission by a senior technician. If any person seeks to evade his/her responsibility by disposing of unauthorised waste down a laboratory sink and it is subsequently detected, the University and the individual will be liable to prosecution. Be aware that although constant review of existing CoSHH forms should be undertaken, it is easy for information to become out of date regarding waste disposal.

Biological Waste

Microbiological/GM waste should be disposed of in accordance with the specific risk assessment associated with the organism / microbe. Animal cell culture waste should be disposed of via autoclave destruction unless otherwise stated in specific risk assessments. All human tissue and fluid waste should be disposed of via the clinical waste route by incineration in accordance with appropriate Human Tissues Scheme of Works specific to the project and the Human tissues, cells and fluids waste disposal SOP. It is YOUR responsibility to ensure you are aware of all appropriate routes of disposal for all specific waste you will generate.

Autoclaved Waste

Where autoclaving has been identified as a suitable disposal method, ensure a risk assessment is in place for the procedure. Many facilities have additional SOPs to cover autoclave use and maintenance. Contact your appropriate senior technician/laboratory coordinator for further info.

General Laboratory Waste

General Laboratory Waste bins - laboratory waste bins lined with black bin liners are for general non-hazardous / non-toxic laboratory waste e.g.: plastic or paper-based waste and other non-hazardous waste from the laboratory not contaminated with cultures. Overflowing bins should be disposed of in the blue wheelie bins, NEVER pile full waste bags beside a full waste bin or on the floor.

Glass Waste – Although broken glass is disposed via general landfill it must never be placed into general laboratory waste bins. Consult local procedures for broken glass bins.

Sharps Disposal - Sharps boxes are provided for ALL sharps and must NEVER be overfilled. Contact a technician for disposal & replacement. Disposal of full sharps bins is via the clinical waste route and MUST NOT be put into other waste streams.

LABORATORY HOUSEKEEPING / GENERAL PROCEDURES

Housekeeping in all laboratories is everyone's own responsibility. No-one is here to clear up after you! Everyone, regardless of status is expected to clear up after themselves and take some responsibility for laboratory chores.

COMMUNAL AREAS IN LABS:

You will likely have been allocated your own lab work area. Common sense should tell you to keep this area clean and tidy to reduce risks of cross contamination. However, there are many communal areas in labs that you will utilise from time to time and as such, you should make every effort to ensure these areas are kept clean and tidy. Ensure communal waste pots are emptied BEFORE they become overfull, tidy and wipe down surfaces with towel after every use. Anyone found to be misusing communal areas may be stopped from using them.

LABELLING OF CHEMICALS / SAMPLES

All chemicals or solvents are purchased in appropriately labelled containers which will clearly state the identity, concentration (where applicable) and any specific hazards of the contents. The supply containers are also constructed of appropriate material to appropriately contain that substance. At ANY time when chemicals or solvents are decanted into alternative containers or these are used as an ingredient to prepare samples/buffers as part of an experiment, it is the users' responsibility to ensure that all containers are appropriate for the chemicals involved and for the sorts of exposures and storage they will undergo (centrifugation, freezing etc). Also it is the user's responsibility to ensure that ALL bottles, tubes, vessels, sample tubes etc are appropriately labelled giving details of not only the chemicals but the concentration and any specific risks or hazards along with user identification. For volumes of any chemical stored on users benches, use labelling in accordance with the GHS (globally harmonised system) to identify risks (hazard pictogram stickers must be used where appropriate).

If a beaker of unknown contents is found in the lab and it is not possible to identify the contents it will be treated as potentially dangerous. Costs for disposing of such a substance are high; ***LABEL ALL CONTAINERS AT ALL TIMES – THIS IS YOUR LEGAL RESPONSIBILITY*** (in accordance with Health & Safety at Work Act 1974 Section 7(a)).

All appropriate sample logging procedures must be followed (logging systems in freezers / coldrooms etc). Prior to finishing research at UEA all staff must review their stored items and dispose of any samples which can be discarded appropriately.

CHEMICAL INVENTORIES

It is the legal responsibility of all users to maintain an inventory of all chemicals 'owned' and used by the lab group. Each group will be asked to review their chemical inventory on an annual basis but as groups purchase new chemicals these should be added to the group's chemical inventory lists. Updated lists must be available to the Laboratory Manager on request.

APPROPRIATE STORAGE OF CHEMICALS / SAMPLES

All chemicals and solvents must be stored appropriately. There is ample storage areas for all types of chemicals in BCRE and so there are no excuses for poor storage arrangements;

- Ensure ALL FLAMMABLES in the main lab are stored in the purpose made flammables storage cupboards. Volumes of working solutions of flammables on users' bench must not exceed 500ml.
- Other solvents & chemicals must also be stored in appropriate locations in appropriately labelled cupboards / locked storage containers – corrosives, oxidisers, acids, toxic etc.

If you are not sure where to store your chemical please ask your senior technician / facilities manager.

GLASSWARE WASHING - COLOURED BOX SYSTEMS

In all labs, Green plastic boxes are for thoroughly rinsed general glassware for washing up. Once full, your green box must be taken to the wash-up room. Do not put the wash up staff at risk by putting contaminated glassware in glassware boxes; rinse all glassware thoroughly.

If in doubt about waste disposal, ask a Technician or the Facilities Manager and read your CoSHH.

STORAGE LIMITATIONS:

There is limited storage availability throughout laboratories. As such, it is your responsibility to periodically check and tidy up cupboard space, fridges and freezers. Do not purchase new storage units when existing units are full of out-of-date/rarely used items or consumables. The limited storage capacity is also directly related to fire risk; full and cluttered rooms are not only a fire hazard due to large amounts of combustible items but also increase the risk of starting fires by hiding wiring, causing heat build-up where paperwork etc is piled up. In laboratories, storage of unnecessary substances can also cause increased fire risk. To avoid overstocking, if you need to purchase consumable items and it is cheaper to purchase in bulk please consider the storage implications and see if you can share stocks with other people or groups. Individuals found ordering in bulk unnecessarily may have orders blocked.

MOBILE PHONES, LAPTOPS AND OTHER SMALL PERSONAL PORTABLE DEVICES IN LABS

THINK about use of personal items / equipment in laboratory environments. Their use is permitted in most research laboratories at UEA (some specific restrictions apply) however please do not use your mobile phone, music player etc at the laboratory bench (this includes using it as a calculator) and never use any of these devices whilst wearing gloves. With respect for your colleagues around you consider having mobile phones etc on silent whilst in a lab environment. Consider the risks of cross contamination when taking these items in and out of labs, particularly items (eg a laptop) which you may put down on your lab bench. Ensure you have designated 'clean' areas for any items used on the bench and consider wiping items down with dilute disinfectant when removing them from labs. Users are reminded that they must at all times be able to hear emergency alarms or noises / warning sounds associated with laboratory equipment above any personal device/ear phones.

EMAIL LISTS

There are e-mail lists associated with each School at UEA. As a member of staff for a specific school you will be automatically added to your school mailing list. There are specific laboratory e-mail lists which it is important that you are registered to. There may also be lists for all users of a specific facility you use or specific procedures which you use in your work or it may be appropriate for a facility / area manager/technician to have your e-mail address as a registered user (eg BCRE laboratory users, Biorespository users, BMRC users, CL2+ suite users, human tissue users etc). It is a user's responsibility to ensure they are registered for the various email lists specific to the areas in which you work – speak to the technician, or person responsible for facilities to ensure that you have been registered to all those which are appropriate. You may miss important messages and information until you do this.

APPENDIX I – ‘THE SAFETY DECLARATION’

Faculty of Medicine and Health Sciences HEALTH AND SAFETY CODE OF PRACTICE

As part of the Faculty’s commitment to Health and Safety, all staff who will work within the Faculty and its associated buildings / facilities are required within TWO DAYS of arriving at UEA to have read this ‘FMH Health and Safety Code of Practice’.

All staff working in FMH buildings but NOT working in laboratories are required to read SECTION 1 of the Code of Practice only.

All staff working in Faculty buildings INCLUDING working in the laboratories are required to read SECTION 1 AND SECTION 2 of the Code of Practice.

Please complete the form below but sign only one section, please indicate by score outs which section is appropriate.

Any member of staff / PG student will not be granted card or coded access to any part of the Faculty until this form is received. The form will then be held on file by the relevant school office*.

INDIVIDUAL STAFF SAFETY RECORD

FULL NAME (Please print clearly:

Supervisor (PI) / Line Manager:Staff/Student No.
(number below name on campus card where applicable)

ROOM NUMBER (most common location at UEA): SCHOOL:

START DATE:CONTRACT END DATE (if applicable):

Please cross through the statement below not applicable to you and sign the appropriate one:

Staff working in school buildings but NOT working in the schools laboratories or research facilities:

I hereby acknowledge receipt of a copy of the FMH Health and Safety Code of Practice. I have read and understood all of ‘Section 1’ of this code and agree to adhere to requirements laid out in this document.

Signed: Date:

Staff working in Faculty buildings INCLUDING laboratories

I hereby acknowledge receipt of a copy of the FMH Health and Safety Code of Practice. I have read and understood all of ‘Section 1 and Section 2’ of this code and agree to adhere to requirements laid out in this document.

Signed: Date:

* Signed declarations for non-laboratory staff must be returned to the relevant School reception or Faculty Office within two days of arrival at UEA. Signed declarations for laboratory staff must also be copied to Laboratory Manager prior to access card activation.

APPENDIX II – SUMMARY OF UEA LINE OF RESPONSIBILITIES AND SUPPORT FOR

Dean of Faculty (DoF) of Health acts on behalf of the Vice Chancellor in all matters concerned with occupational Health and Safety within the faculty and sits on the University Health and Safety Executive (UHASE). The DoF is responsible for ensuring that systems are established within the faculty to make certain that all legal and UEA Health and Safety policies and guidelines are followed.

The **Head of School (HoS)** holds delegated responsibility from DoF to ensure the school adheres to safety policy and that appropriate systems are maintained to support staff within the school to uphold their responsibilities for Occupational Health and Safety. HoS ensures that any instigator of work within the faculty has the support to appropriately risk assess activities requested of their staff and has responsibility to maintain appropriate monitoring of health and safety throughout the faculty.

The **School Safety Officer (SSO)** is appointed by HoS with delegated authority to ensure that the School complies with UEA Safety Policies and Rules in liaison with Principle Investigators, Specialist Safety officers (see below) and other staff in positions of responsibility regards health and safety. Provides advice or guidance in any aspect of H&S to staff, students, visitors or contractors at UEA.

Principal Investigator Responsibility - The legal responsibility for the safety of any procedure in the workplace lies with the instigator of the work and so in a laboratory environment this is with the Principle Investigator. It is the PI's responsibility to ensure risks associated with their work are appropriately assessed, that their staff adhere to the recommendations given in any risk assessments and that staff have appropriate training to perform the work safely.

Staff / PG / Visitor Responsibility – Responsibility for the safety of themselves and their co-workers lays with individual staff members / PG / Visitors, to follow H&S rules and risk assessments, to operate according to their given training and to seek guidance in any areas of uncertainty.

The following members of staff also hold responsibilities within the Faculty and the University to support and help in specific areas of health and safety:

Specific Safety Officers:

For specific types of activity there are UEA Safety Officers appointed. They will offer advice, ensure appropriate review of Risk Assessments and ensure updated UEA rules / policies are maintained for their specialism. These officers include:

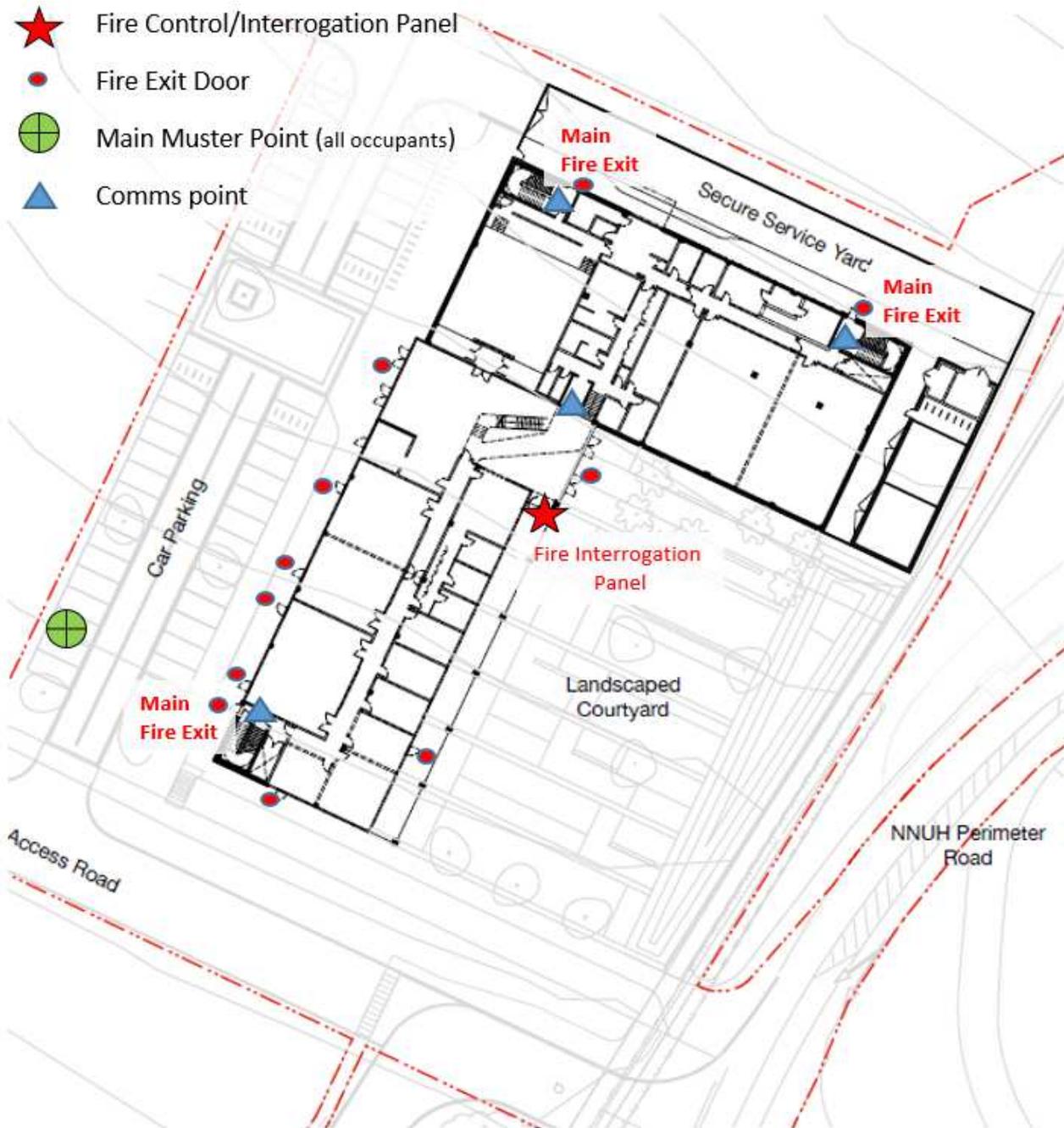
Human Tissues Safety Officer	Mark Williams	m.r.williams@uea.ac.uk	x2244
Microbiological Safety Officer	Jonathan Todd	jonathan.todd@uea.ac.uk	x2195
Genetic Modification Safety Officer	Jonathan Todd	jonathan.todd@uea.ac.uk	x2195

University Safety Services provides all staff and students at UEA with advice and guidance on safety. They have neither an executive nor an enforcement role. They can be contacted any time. Contacts found on <https://intranet.uea.ac.uk/uss/intranet/ussstaff>

BCRE Facilities Manager – acts with delegated responsibility from Head of School to ensure facilities within BCRE meet health and safety standards. Acts in an advisory capacity within the BCRE laboratories.

APPENDIX III – BCRE EMERGENCY AND FIRE EVACUATION PLAN

BOB CHAMPION RESEARCH AND EDUCATION BUILDING
Emergency & Fire Evacuation Plan



In the event of building evacuation following fire alarms sounding, the BCRE Muster Point is as indicated on the map above (⊕). This muster point for all staff is located on the grassed area behind the car parking. In the event of an alarm all staff must stay clear of the roadway as this will form part of the access route for emergency services on arrival.

If any fire or smoke is detected at any time in BCRE buildings, the appropriate actions are to set of fire alarms (by use of break glass call boxes) in order to evacuate the building and to call emergency services (999 or 112)

Fire Alarm System

All fire safety information including a copy of this Fire Evacuation Plan will be held in a fire safety folder at the main Fire Control panel (see ★ on map above). A copy will also be held by UEA Security at The Lodge.

The BCRE is fitted with sufficient fire detector heads to identify the presence of fire at an early stage. Located towards all exits are wall mounted 'Break Glass' alarm points. Any member of staff finding any fire should activate one of these alarm points. All detector heads and alarm points are linked to a fire alarm system with visual and audible alarm signals throughout the building. This alarm system is linked to The Security Lodge on UEA main campus. Norfolk Fire & Rescue Service will only attend an alarm incident if they are alerted to signs of fire by an emergency call (999/112). UEA security will also attend site immediately on sounding of alarms.

The building alarm system is tested weekly at 08.30am every Thursday by Facilities Management suppliers (Billfinger Europa (BE)) at which time the alarm sounds for approximately 10 seconds.

Fire Fighting Provision

Throughout the building there is provision of CO₂ and Foam hand held Fire Extinguisher units and a fire blanket in kitchen area. No member of staff should ever put themselves at unnecessary risk in the use of any firefighting equipment.

Staff Training

All staff are required to read the Bob Champion Research and Education Building Health and Safety Code of Practice which includes specific building fire safety information, within two days of arrival at UEA. All staff will be required to sign a declaration to confirm they have read and understood this document. All new staff and post graduate students who will be located in BCRE are also required to register for and complete the UEA online Fire Safety Training provided by University Safety Services. All NNUH staff must complete mandatory NNUH staff training to include basic fire awareness training.

Evacuation Route Identification

The green signs with the running man posted throughout the building identify emergency evacuation routes. The arrow on these signs shows evacuation direction. Please note that the lift is not an escape route and must not be used in the event of a fire alarm. Please also note there is no exit route via the roof. The normal evacuation route for occupants is via the signed routes towards the North, East or South stairwells or directly to the outside door of seminar rooms located on the ground floor where signposted. All appropriate fire exit routes are identified on the ground floor plan above (see ● on plan above). If the normal route is blocked or appears to be unsafe, other appropriate routes should be used.

The BCRE Fire Warden Team will assist the safe and fast evacuation of building occupants when the alarms are sounded continuously. **These alarms are notice to all building occupants to urgently evacuate the building; there is no exception to this rule.** All persons present in the building must evacuate, refusal to evacuate must be reported to the Senior Fire Warden or their deputy as a matter of urgency. Staff, once evacuated, must not leave site in event of a fire alarm.

Evacuation Procedures for those with Limited mobility

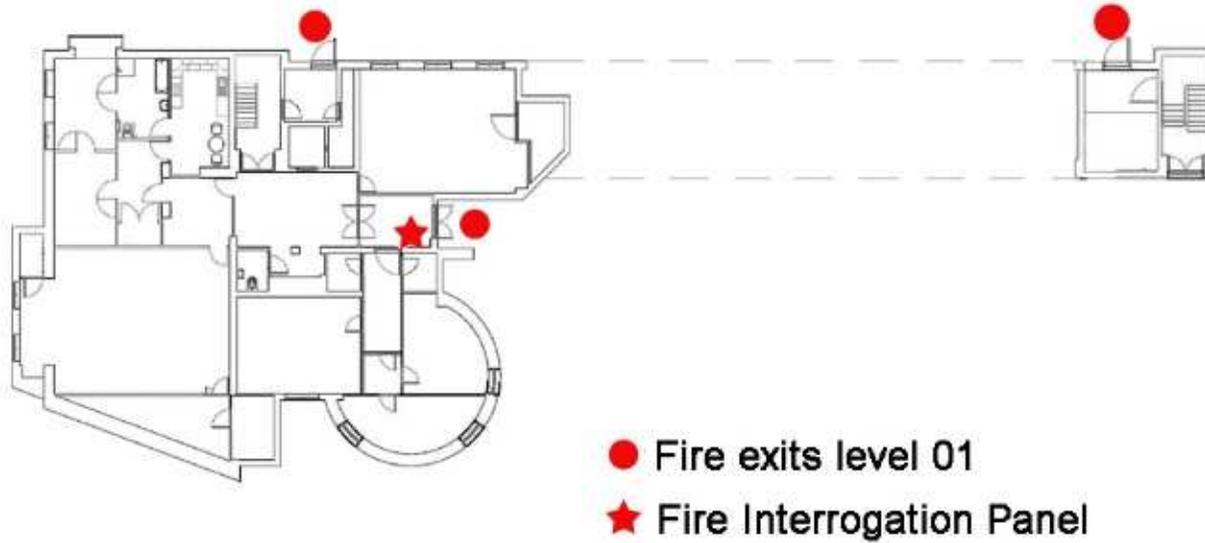
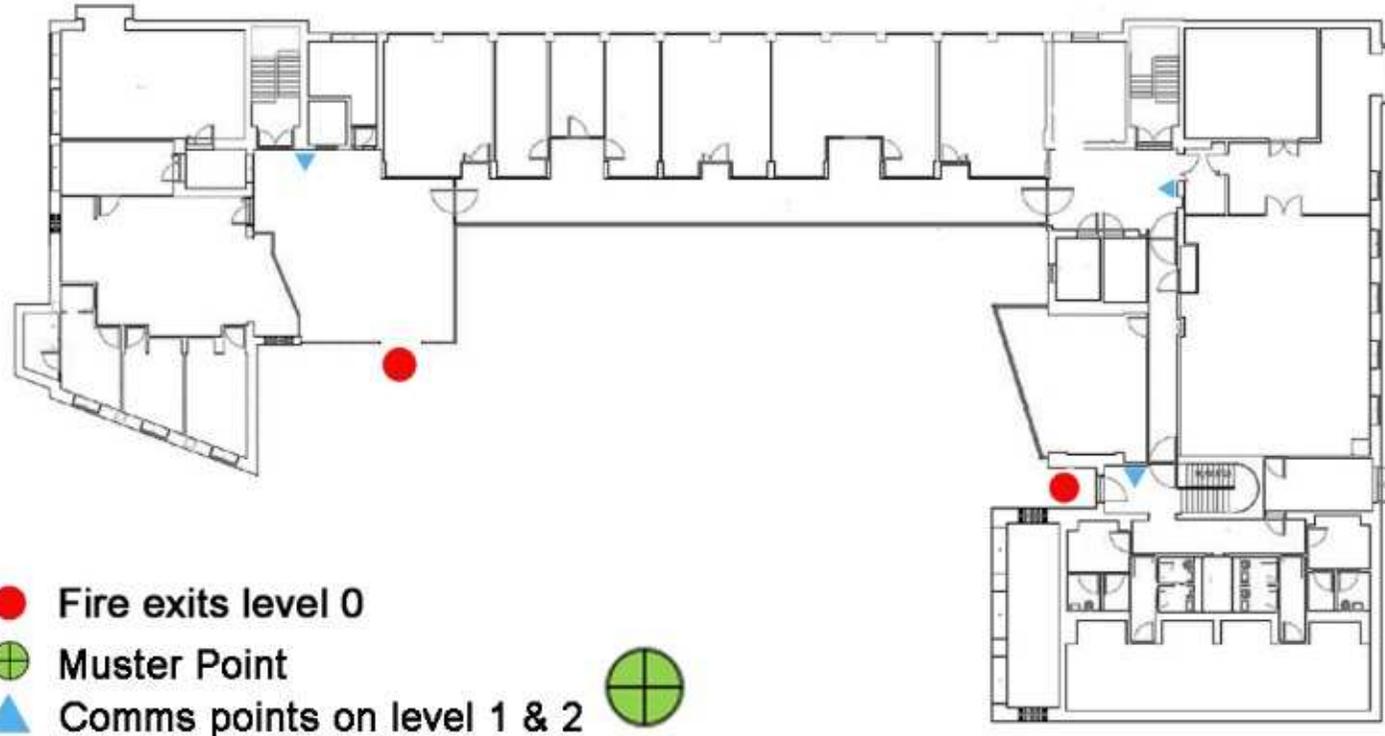
Any staff member, student or visitor to BCRE with mobility impairments must not access the BCRE above the ground floor unless they have a BCRE specific PEEP in place (personal emergency evacuation plan). Staff should contact University Safety Services if a PEEP is required. Any person with limited mobility in the building in the event of a fire should evacuate to a stairwell where they will find an evacuation chair to assist with evacuation. At stairwell and lift lobbys there is also a two way comms point linked to the BCRE fire control panel and UEA Security Lodge (see ▲ on plan above, located on every floor) . This comms unit can be used to discuss evacuation issues.

**APPENDIX III – NORWICH MEDICAL SCHOOL BUILDING (MAIN SITE) EMERGENCY
AND FIRE EVACUATION PLAN**

Senior Fire Warden	Location	Contact Number
Helen Sayer	MED 1.06	01603 593177
Deputy Senior Fire Warden	Location	Contact Number
Catherine Butcher	MED 1.22	01603 591955

Name of Fire Warden	Area responsible for evacuating
Stanley Musgrave	MED East, Floor 2 – top half of office
Antony Colles	MED East, Floor 2 – bottom half of office
Vivienne Maskrey	MED West, Floor 2 – top half of office
Angela Robinson	MED West, Floor 2 – bottom half of office
Annie Blyth	MED West, Floor 2 – top half of office
Ruth Flather	MED Floor 1 – high end swipe area and toilets.
Catherine Butcher	PBL Corridor Floor 1
Raquel Arroyo	MED 1.07a and MED 1.06
Helen Sayer	Front entrance liaison with Fire Safety Officer/Security Ground floor including 0.17, room of requirement and toilets.

APPENDIX III – QUEEN'S EMERGENCY AND FIRE EVACUATION PLAN



APPENDIX III – QUEEN'S BUILDING EMERGENCY AND FIRE EVACUATION PLAN

Senior Fire Warden	Location	Contact Number
John Thompson	Queen's 2.15	01603 591174
Deputy Senior Fire Warden	Location	Contact Number
Dawn Standley	Queen's 0.04	01603 593636

Name of Fire Warden	Area responsible for evacuating
Sally Bailey	Floor 01 then attend rear entrance
Sadie Jones	Floor 01 then attend rear entrance
Dawn Standley	Floor 0 then attend changing room entrance
Christine Sellgren	Floor 0 then attend changing room entrance
Anita Williamson	Anatomy Rooms only
Neil Coull	Floor 1 then attend main entrance
Simon Horton	Floor 1 then attend main entrance
Toby Smith	Floor 2 then attend rear entrance by EFB
Fiona Poland	Floor 2 then attend rear entrance by EFB
John Thompson	To go directly to the fire panel.

APPENDIX III – QUEEN'S BUILDING EMERGENCY AND FIRE EVACUATION PLAN

Queen's Building first aiders

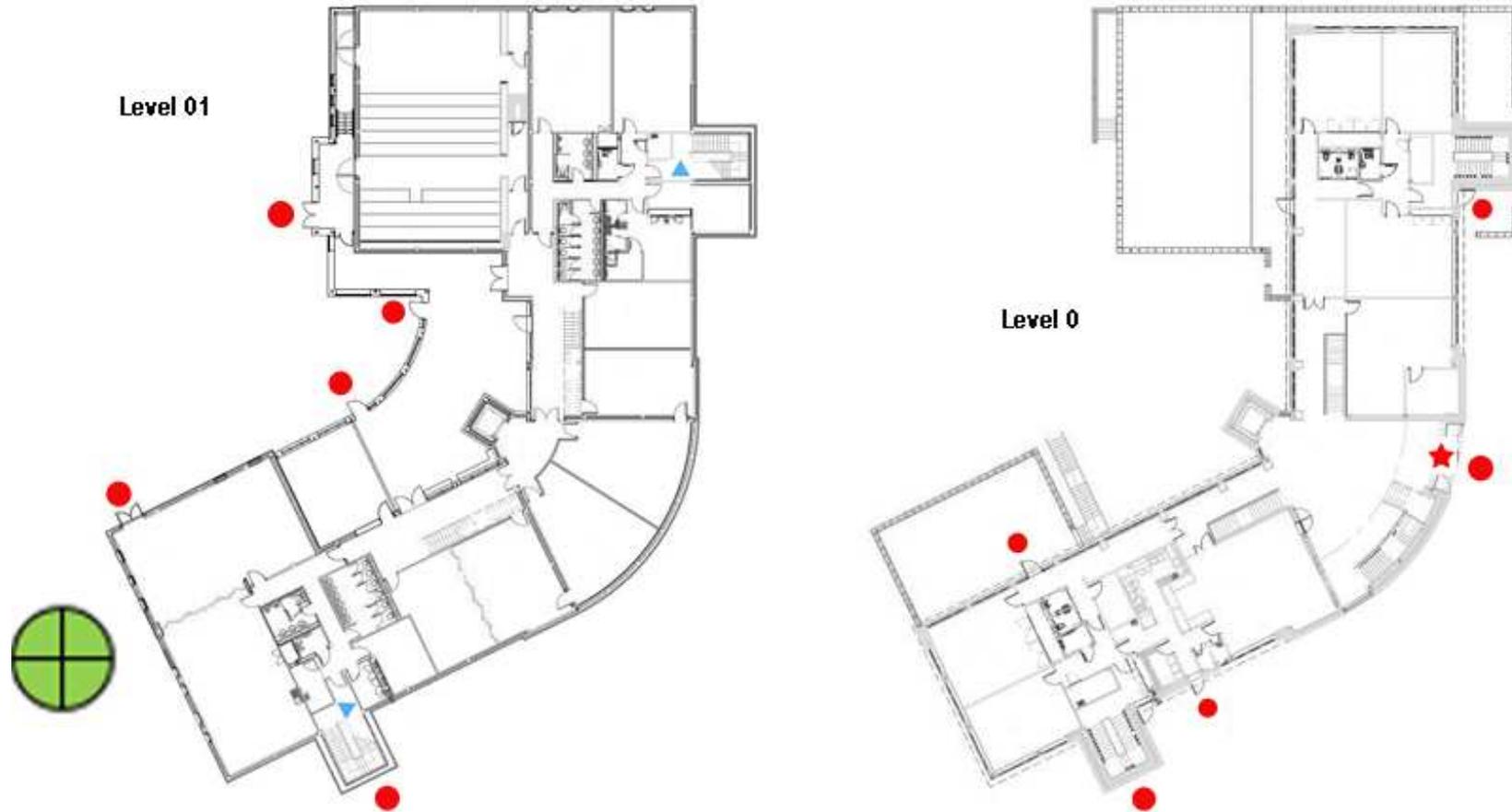
The following people are qualified in First Aid:

	<u>Room</u>	<u>Ext</u>
John Thompson	2.15	1174 or 07764211497
Patricia Harris	1.11	2175
Brigitte Nelson	0.03	7338
David Payne	1.21	7268

First Aid boxes are located as follows:

0.04	Reception	2.01	Staff Common Room
0.26	Anatomy Room	2.15	Technician Room
1.24	Creative Arts Room	2.28	Physiotherapy Room
1.28	Physiotherapy Room		

APPENDIX III – ECB EMERGENCY AND FIRE EVACUATION PLAN



-  Fire Exits
-  Muster Point (car park)
-  Comms points on level 01, 1 & 2
-  Fire Interrogation Panel

APPENDIX III – ECB EMERGENCY AND FIRE EVACUATION PLAN

Senior Fire Warden	Location	Contact Number
Andy Tallis	ECB 2.12	01603 5917007
Deputy Senior Fire Warden	Location	Contact Number
Peter Kaliski	ECB 2.12	01603 597056

Name of Fire Warden	Area responsible for evacuating
Tony Jermy & Judy Barker	Floor 2 “adult end”
Lawrence Hill, Helen Bell & Jamie Murdoch	Floor 2 “Midwifery end” & Mezz 2
Felicity Hinch	Floor 1 “Local Support end”
Kirsty Henry	Floor 1 “MH/LD end” & Mezz 1
Lucie Dack & Peter Kaliski	Floor 0 “IT rooms end” & Reception
Joy Taylor	Floor 0 “0.12A/B end” and café then attend emergency exit from stairwell outside 0.12A
Lisa Richards	Floor 01 changing rooms end then attend 24-hour entrance
Sally Roskrow	Floor 01 Lecture Theatre & social space
Anita Vaughan	Floor 01 “Skills labs end” & 01.10A/B then attend skills lab exit
Andy Tallis & Peter Kaliski	To go directly to the fire panel.

APPENDIX III – ECB EMERGENCY AND FIRE EVACUATION PLAN

ECB First aiders -

GARY PARLETT	FLOOR 2	7058
ANTHONY JERMY	FLOOR 2	7138
PETER KALISKI	FLOOR 2	7056
SALLY MELLOWS	FLOOR 1	3532
FELICITY HINCH	FLOOR 1	3916

THE FIRST AID BOXES ARE LOCATED:

ECB

RECEPTION cupboard

ECB

AED available in Reception

APPENDIX IV – CURRENT OUT OF HOURS CONTACT SHEET

EMERGENCY CALL OUT LIST

In event of medical or fire emergency dial 999

1. For problems with equipment in lab areas, if available the user or owner of equipment should be contacted as indicated on the 'Apparatus in use beyond normal hours' card attached to the equipment.
2. In the event of a general incident (eg minor flood or power loss) the BCRE general call out should be initiated via UEA Jobdone and following persons may be contacted according to the area of BCRE where the problem originates.
3. For wide-spread incidents requiring fast response notify The UEA Security Lodge 01603 592352 to initiate appropriate call-out procedure. Call out those on the secondary list as required in the event of a major incident.
4. If there is a radiation hazard follow the posted instructions from University Safety Services (posted in Radioisotope lab).

Primary List:

BCRE General Call out		
Via UEA Jobdone (via Billfinger	*Please also report via UEA jobdone*	01603 592121 0844 3353893)
Facilities Management Contacts		
	Andrea Poll (BCRE Facilities Manager) Paul Danskin (Account Manager)	** **
Ground Floor		
NANIME (West wing)	Contact Facilities Management	As above
Biorepository Lab & support facilities Labs 0.37/0.39	TBC Jasmine Waters John Wain	- 07788 560477 **
Floor 1		
CSRA (West wing)	Lesley Bowker	**
MED Laboratories (East wing) OR TC lab 1.28 only	Jasmine Waters James Goillau Dietmar Steverding	07788 560477 ** **
Hot lab (lab 1.37)	University Safety Services Jasmine Waters	01603 592763 07788 560477
Floor 2		
MED Research Office (West wing)	or Jasmine Waters	07788 560477

Secondary List:

BCRE MED Contacts		
BCRE/ School Safety Officer	William Fraser	**
MED Head of School	Michael Frenneaux	**
BCRE NNUH Contacts		

** All emergency contact numbers held by UEA security (01603) 592352 or in emergency (01603) 592222

APPENDIX IV – CURRENT OUT OF HOURS CONTACT SHEET

HSC EMERGENCY CALL OUT LIST

In event of medical or fire emergency dial 999

5. In the event of a general incident (eg minor flood or power loss) the ECB general call out should be initiated via UEA Jobdone.
6. For wide-spread incidents requiring fast response notify The UEA Security Lodge 01603 592352 to initiate appropriate call-out procedure. Call out those on the secondary list as required in the event of a major incident.

Primary List:

ECB General Call out		
Via UEA Jobdone (via Billfinger	*Please also report via UEA jobdone*	01603 592121 0844 3353893)
Facilities Management Contacts		
	Andrea Poll (ECB Facilities Manager) Paul Danskin (Account Manager)	** **

Queen's Building General Call out		
UEA Jobdone		01603 592121

Secondary List:

HSC Head of School	Rosalynd Jowett	x3940 07827921955
HSC Faculty Manager	Brigitte Nelson	X7338 07584427911
HSC School Manager	Felicity Hinch	X3916 07949869064 01379652072
Technician, H&S officer	John Thompson	X1177 07963342636 01692402182

** All emergency contact numbers held by UEA security (01603) 592352 or in emergency (01603) 592222