

SAFETY ACTION PLAN: DEPARTMENT OF CHEMISTRY

Use this section to record H&S Objectives				Use this section to track progress and report to Faculty PVC or Divisional Head	
Part A	Objectives	Staff Contact ¹	Date for completion	Date completed	Notes
1.	Further develop fire safety plan and procedures in response to Fire Risk Assessment in May 2018. Issues: fire doors being chocked open; microwave ovens in offices; fire action notices need updating; kitchen areas need fire blankets; fire wardens need to be identified and trained; evac chair operators need to be identified and trained.	CS, DSC	30 Sep '18		Fire warden provision and training is still being planned. Microwaves have been removed from offices. Fire doors are closed in all rooms apart from a small number where overheating is a problem. Central staircase cleared and temporary barrier installed. Fire action notices have been checked and fixed as appropriate. Fire blankets have been installed in kitchens.
2.	Review departmental fire procedures.	CS, DSC	Sep '18		Examine procedures for personnel with disabilities.
3.	Code of Practice for cleaning glassware in Dept. Safety Policy.	DSC	Jul '19		Provision of recommended cleaning methods, particularly for 'difficult' items, e.g. sinter funnels. Policy agreed at Safety Committee, Oct 17. Rolled over to next year in favour of other issues raised by Safety Audit.
4.	Review of Manual Handling procedures in Dept. Safety Policy.	CS	Jul '19		Bring into line with current HSE and UHSS guidelines (inc. MAC tool)
5.	Removal of gas cylinders from laboratories and replacement/renewal of manifolds for compressed gases.	E&F, DSC	Jan '20		Work being done in stages. Stage 1 (wing above NMR/MS, CG193) will be complete early Oct 2018. Completion likely 2020. Paul Hammond is E&B contact. £2m funding agreed (UEC).
6.	Appointment of a new manual handling officer.	CS	Apr '19		Existing staff member. Training will be required but courses often fully booked.

¹ **Key:** SC, safety committee; DSC, departmental safety coordinator (Dr John Sanderson); AU, Andrew Unwin; PH, Paul Hofmann; CS, Connor Sibbald; GSo, Gary Southern; RLT, Richard Thompson; BD, Bryan Denton; HoD, head of department (Prof Karl Coleman); CH, Carole Hubery; OE, Omer Ekinoglu; KS, Kerry Strong; EK, Emma Knighton; PC, Philippa Coffey; JR, Jacque Robson; LM, Litka Milian; LOP, Lars Pålsson; EW, Eckart Wrede; EJG, Elizabeth Grayson; OVC, Olga Chetina; AM, Andrew Mulligan (UHSS); NH, Neil Holmes; MR, Malcolm Richardson; WDC, Doug Carswell.

7.	Provide refresher training for academic and technical staff in the use of fire extinguishers.	CS	Sep '18		Process ongoing.
8.	SC-B/A mock response.	CS	Sep '17 Jul '18		Postponed to 2019. Reassigned to CS (Mar '18). PW has taken lead on organising team and arranging training (Jun '18). Training will take place in Nov, mock response will occur sometime in the following months.
9.	Clarifications to minimum safe staffing levels, quoracy in critical incident teams, guideline for safe operating procedures.	DSC	Nov '18		In consultation with UHSS.
10.	Provision of a central walk-up computer for printing of QR codes from LabSafe	DSC, CS	Sep '17		Computer requisitioned and delivered. Location identified, awaiting remedial work to install network point (CIS ticket has been raised).
11.	Review use of nano fume cupboards and procedures for working with carbon nanotubes as part of nanolab installation.	HoD, DSC	Oct '18		Will occur when the time frame for Nanolab work is better known. Work has started on nanolab (Jan '18) and no completed (Jun '18).
12.	Review of safety assessments for teaching laboratories	EK, KS, PC, LM, JR, LOP, EW, EJG, PH, OVC	Sep '19		Updated R/S to H/P; updated risk assessments (student and demonstrator-facing); updated risk assessments for support staff; put measures in place to record training activities (e.g. demonstrator training); provided mechanism to record completion of risk assessments by students.
13.	Replacement of -80 °C freezer used for storing CO ₂ .	RLT	Mar '18		Use of a chest freezer is not best practice. Discussed with RLT Oct '17. Greenspace bid currently being drafted (Oct '18).
14.	Risk assessment for First Aid kits.	CS/KS	Jan '19		To include consideration of whether EpiPens are needed as standard.
15.	SOPs in place for workshops (electrical, mechanical, glassblowing).	DSC, AM, BD, NH, MR	Apr '17		Ongoing. Process needs reinvigorating.
16.	Departmental Chemicals Amnesty	DSC, CS	Jul '19		Repeat following success in 2018.
17.	'Version 1' SOPs in place for common activities used in UG and research labs	CS	Sep '19		Work will take place over the summer. Ongoing – will roll into next year.

18.	Solvent purification system up and running for users.	CS	Jan '19		Good progress has been made reducing water content of THF. Progress made, will roll into next year.
19.	Removal of unused acetone tank from solvent stores	CS, E&F	Jan '19		Ticket has been raised.
20.	Safety Away Day	DSC	Jun '19		Insufficient time to allocate over summer '18 because of external safety audit, roll into next year.
21.	Staff refresher retraining in H&S.	DSC, HoD	Sep '18		Insufficient time to allocate over summer '18 because of external safety audit, roll into next year.

Use this section to record H&S Objectives				Use this section to track progress and report to Faculty PVC or Divisional Head	
Part B	Annual Requirements	Staff Contact ¹	Date for completion	Date completed	Notes
1.	Health and Safety Policy: <i>To be reviewed annually and signed/dated by HoD (UHSS Guidance G6, Management Standard MS1).</i>	DSC, HoD, AU, SC, CH	Sep '19		Major review for each new HoD, normally every 3 years (last one Aug '17). Annual review each August (last one Sep '18).
2.	Meetings of the Health and Safety Committee or Group: <i>Not less than one per year (UHSS Guidance G6; Dept Policy Section J, Part 3).</i>	AU, DSC, SC	Jul '19		Meets 3 times per year and reports to Board of Studies. The Safety Executive Committee meets when required to deal with arising safety issues.
3.	Practice fire evacuation: <i>At least once per year (UHSS Guidance FSG02, FSG09; Dept Policy Section B, Part 1f).</i>	AU, DSC	Jun '19		Preferably twice per year. Fire evacuations are normally conducted in Michaelmas term and sometimes Epiphany term.
4.	Health and Safety Induction: <i>given twice per year (UHSS Guidance G28; Dept Policy Section D, Part 7).</i>	DSC, CS, SRT, AU, BD	Oct '18 Apr '19		Normally given in October and March/April of the following year. Equivalent training material also available online.
5.	Fire extinguisher training: <i>(UHSS Guidance G6, Management Standard MS8; Dept Policy Section B, Part 1b).</i>	CS	Oct '18		Normally given in October to all new staff, postgraduate students and PDRAs. Optional for L4 masters students.
6.	DSE assessment: <i>assessed for new starters and reviewed every 3 years (UHSS Guidance G12; Dept Policy Section D, Part 3a).</i>	CS, DSC	ongoing		Self-assessment by all new starters, continuing personnel if there is a change in circumstances and by everyone at least every 3 years.
7.	Chemical Weapons Convention reporting <i>(UHSS Guidance TG11; Dept Policy Section D, Part 3d).</i>	AU	Feb '19		Reports are required annually. LabSafe is useful as a starting point, but research group leaders need to confirm usage.
8.	Health and safety self-inspection: <i>At least once per year: (UHSS Guidance G6, G28; Dept Policy Section J, Part 1).</i>	DSC, SC	Aug '19		The Department is inspected, one third at a time, each term. Areas with serious issues are revisited. Safety inspections also include non-SC members.
9.	Health and safety self-inspection: <i>Safety audit and annual Tidy Up. (UHSS Guidance G6, G28; Dept Policy Section J, Parts 1 and 2).</i>	PH, DSC	19 Sep 18 (Tidy Up) Nov '18 (audit)	19 Sep '18	Self-inspections of labs by research groups are included in the Annual Tidy Up. The Safety Auditor usually reports in November.

Use this section to record H&S Objectives				Use this section to track progress and report to Faculty PVC or Divisional Head	
Part C	Continuous Processes	Staff Contact ¹			Notes
1.	PAT testing of electrical equipment: <i>ongoing process (UHSS Guidance Section G10; Dept Policy Section F, Part 2).</i>	OE, BD			All electrical equipment in labs/office tested on a regular basis. Each item is stamped with the test date and retest date.
2.	Fire alarm testing (<i>UHSS Guidance Section FSG015; Dept Policy Section B, Part 1f).</i>	E&F, CS			Normally between 08:00 and 08:30 each Wednesday.
3.	Maintenance of First Aid boxes and lists of first aiders (<i>Dept Policy Section B, Part 3).</i>	KS			To report usage/need for replacements, or other issues, please contact KS.
4.	Continue effort to encourage more academic and technical staff to become first aiders.	CS, DSC			There is currently a queue. Will encourage Occupational Health to continue training, and make sure refresher training is timely. Potential additional specialist first aiders have been approached.