

Department of Medicine, AH/NH

Occupational Health, Safety & Environment Committee

Minutes of Meeting

25th October, 2011

Present:

Susan Hisheh (Chair), Helen Dedman, Trish Russell, Karey Cheong, Daniela Sartor, Andrew Ellis, Peter Wookey, Ira Tedja

	Actions
<p>1. Apologies Sheila Patel, John Damiano, Chandana Herath</p>	
<p>2. Minutes of Previous Meeting Approved</p>	
<p>3. Accidents & Incidents a. Needlestick – clinical Repat Staff member tested negative for infectious disease following needlestick injury. SWP needs writing to ensure that the correct lancets are used in future.</p>	<p>Mary Caruana to provide SWPs for all procedures in Proietto clinical area</p>
<p>b. Manual handling injury – Austin Shoulder injury occurred while lifting bag to put in skip. Staff member did not sustain injury – to request assistance with manual handling tasks in future</p>	
<p>4. Reports from Other Safety Committees a. NAT meetings Ira Tedja advised that these would be starting again in November to catch up with safety personnel.</p>	<p>Helen to report to committee about FNI meeting</p>
<p>b. MBC safety meeting Helen recently attended and advised that there is still no-one assigned to manage laboratory safety at MBC. Also advised that regular inductions will be run to inform personnel of evacuation, first aid procedures etc.</p>	<p>Helen to advise when further information is obtained.</p>
<p>5. New and Revised Policies and Procedures a. New OHSE Faculty Manager Ira Tedja was introduced to the committee. Her contact details are- email: ira.tedja@unimelb.edu.au and tel: 9035 6358.</p>	
<p>b. Immunisation Two draft immunisation forms were circulated – one for general work immunisation and one for immunisation/treatment for travel. Suggestions were received from the committee and the forms were amended accordingly.</p>	<p>Susan to circulate forms to all personnel and supply to Martha for induction kit.</p>
<p>6. Environmental Issues a. Coldroom LTB5 Coldroom on LTB 5 has now been cleaned and repaired and is ready for use. Andrew Ellis to obtain shelving for coldroom.</p>	<p>Personnel to ensure coldroom remains clean and tidy.</p>
<p>b. Air conditioning LTB5 Requests for installation of replacement units in office areas requested. Susan is liaising with Ray George to see if the Hospital will agree to replace the units.</p>	<p>Susan to follow up with Ray George.</p>
<p>7. Inspection Reports a. Lab/office inspections See lab non-conformances attached.</p>	<p>All non-conformances to be rectified in timely manner. Susan to send Northern lab checklist to manager of NorthWest centre.</p>
<p>8. Emergency or Security Issues a. PA system LTB PA system now installed in LTB however correct evacuation procedures are unclear. Susan consulted with Hospital Engineering who advised that we don't evacuate on Code Red but on Code Orange. If Code Orange is called for any floor in LTB, we evacuate. However was also advised that new Austin OHS</p>	<p>Susan to obtain more information from new Austin OHS Manager.</p>

Manager is reviewing these procedures and will advise us about correct procedures soon.	
b. Revised evacuation procedures These will be completed when new procedures received. In the meantime, Susan to check if alarm still sounds – if so evacuate when alarm sounds as per old procedures.	Susan to check about alarm and revise procedures when more information received.
c. Emergency procedures – BRF & Kronheimer Helen advised that Code Blue is different for BRF/Kronheimer to rest of Austin Hospital. This needs to be clarified – information session to be held for BRF/Kronheimer personnel.	Helen to advise of information session.
9. Radiation Safety a. Moving equipment from Repat to Austin Radiation-related equipment to be moved from Repat to Austin includes free-standing centrifuge but not counters.	
b. Level 10 Radiation lab This lab to be converted to bacterial room and all radiation work to be performed in radiation lab on level 7 LTB.	Susan to clean out room and assign equipment.
10. Chemical and Biological Safety a. ChemWatch Susan liaised with Steve Guggenheimer to ensure new inventories were entered. However have not been able to enter ChemWatch Gold to check if inventories are now correct because the program does not work.	Ira to follow up to get ChemWatch Gold working.
b. Poisons safe BRF Safe (from Dept Surgery) for schedule 8 poisons to be placed in BRF – Julia Fyfe advised she is waiting on it to be affixed to wall. Susan received advice from Dept Health that both Depts Medicine and Surgery can share this safe provided that this was documented in the Poison Control Plan for both departments.	Julia to have safe affixed and Surgery/Medicine to share for Sch 8 poisons. Key holders to be appointed.
c. Poisons permit – Austin Centre Susan checked with Dept Health if one Poisons permit for Austin Academic Centre is permissible. This may be possible provided the responsible person(s) are able to monitor activities of personnel to ensure compliance. If we proceed, need to request this in writing.	Helen to advise Susan if/when submit an application for Academic Centre licence.
11. Training a. EHS training Ira advised that some training is on-line (Roles & Responsibilities for staff/students and Supervisors, Risk Management, Injury Management) – both initial and refresher training. The other sessions (Manual Handling, Chemical Management, PPE, Gas Safety) are conducted face-to-face.	Susan to advise personnel of required training and details.
b. IBC Education Forum This will be held on 9 th November – all personnel working with PC2 material to attend.	Details on website.
12. Cyclic Events Checklist a. Poison permit - Repat Permit renewed recently but will need to be cancelled once Repat personnel move to Austin.	Susan to cancel permit in November.
b. Biol Safety cabinet testing This is due in November/December.	Susan to arrange.
c. Autoclave servicing This is due at end of year.	Susan to arrange.
13. National Audit Tool a. Ira advised that she is working on closing out all Faculty non-conformances from the audit. The audit schedule for 2012 should be known in November.	Ira to advise Susan of audit dates for 2012.
14. Faculty EHS objectives a. Objectives for 2011:	
i) Improve health monitoring and vaccination systems for staff and students Susan to check monitoring and vaccination systems of all personnel and advise where gaps identified.	Susan to circulate new immunisation form to all personnel.
ii) Ensure testing and tagging of electrical equipment is completed in line with required standards. Testing and tagging is conducted by University-hired contractors in line with	

required standards. All sites completed for 2011.	
iii) Implement a system for EHS Coordinators Professional Development This is done at the Faculty level.	Ira to follow up on this.
iv) Improve chemical management by upgrading registers into the new Chemgold system and remove cleaning materials that are hazardous substances. New registers have been submitted and these do not include cleaning materials however still significant problems with Chemgold.	Ira to follow up to get Chemgold working.
v) Ensure suppliers and contractors are on approved listings, are provided with and induction process, and are held accountable for their work/products. Susan has requested for suppliers to be placed on approved suppliers list. All contractors are inducted and return to service checklist is completed. Electrical and safety equipment checked on arrival to ensure it meets standards.	Susan to send list of contractors/suppliers used to Ira.
15. New business	
16. Next Meeting 13 th December.	