

<b>Biological Safety Policy</b>			
Policy✓	Code of Practice...	Guidance...	Procedure...
Organisation-wide✓		Local...	
Approved by the University Health & Safety Committee			
Chairman	Eliot Glover	Date	6 <sup>th</sup> February 2023
		Review date	2026
The purpose of presenting this documents to the University Health and Safety Committee Standard 3 year re-fresh✓ Changes in practice and/or legislation... New Policy...			

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### **Foreword**

The Policy is issued in addition to and in support of the University's General Policy on Health and Safety at Work. This Policy is a cornerstone document that details the University's commitment to Biological Safety, sets out the responsibilities that enable staff, students, and visitors to comply with the law, develop and then follow safe working practices when working with biological materials and Genetically Modified Organisms (GMOs).

## 1 Policy Statement

Brunel University London (Brunel) is committed to ensuring that all work with biological materials and GMOs is done to the highest standards, and is compliant with all relevant regulatory and legal requirements. All biological and GMO work must be performed with minimum risk to staff, students, visitors and the environment. Consequently, the University requires that:

- 1.1 Suitable and sufficient risk assessments must be undertaken before any work with biological materials (or GMOs) commences. This must include assessment of the areas where the work will be undertaken to ensure that they are appropriate for the planned work. All work must be conducted by suitably trained, competent personnel.
- 1.2 All work involving GMOs; human or animal pathogens; and all infectious agents classified as hazard group 2 (HG2) or above, are subject to review by the members of the Biological and Genetic Modification Safety Committee (BGMSC). All work with relevant material of human origin must be approved by the relevant University Designated Individual before the work commences.
- 1.3 The University Health, Safety and Environment Officer must be informed directly of all work involving the use or planned use of HG2 pathogens (and above), and also of any work covered under the Genetically Modified Organisms (Contained Use) Regulations 2014 ('the GMO(CU) Regulations').
- 1.4 All facilities handling Biological materials and/or GMOs shall ensure that all waste material is disposed of appropriately through one of the established waste streams within the college or institute, and that emergency procedures are in place to deal with spillages and releases, as well as medical, fire and security arrangements.
- 1.5 It is the responsibility of the principal investigator (PI) to ensure that risk assessments are in place and to identify the potential need for Health Surveillance for those either directly or indirectly involved in the project work. Where no PI has been identified, it will be the responsibility of the project supervisor/manager.
- 1.6 Transport of Biological materials and/or GMOs shall be classified, packaged, labelled and documented in accordance with all relevant transport regulations. It is important to ensure that all relevant material transfer agreements are in place before transport.
- 1.7 All accidents/incidents involving Biological materials must be reported immediately to a supervisor and an accident report form must then be completed and submitted to the Health and Safety Team via the health and safety inbox.
- 1.8 Where shared laboratory facilities are in existence, someone in overall control must be identified to ensure that all individuals working in the laboratory are sufficiently informed about all the risks that may be present, and about the nature of the work being undertaken.

## **2 Responsibilities**

### **2.1 Executive Board (EB)**

*This group typically consists of the Vice-Chancellor, Secretary, Chief Governance Officer, Chief Operating Officer, Deans and Directors who have the responsibility for influencing and shaping the strategic direction of the HEI.*

As an integral part of their management responsibilities the EB will be responsible for assisting the Vice Chancellor in:

- 2.1.1 The implementation of this Biological Safety Policy;
- 2.1.2 The management of health and safety (Biological Safety) within areas under their control, and the health and safety of staff, students and visitors;
- 2.1.3 Bringing to the attention of the Vice Chancellor any part of the Biological Safety Policy where it is considered that revision is necessary.

### **2.2 Senior Managers** *(This group may include Deputy Deans/Directors, Subject/Divisional Leads and Directors of Research).*

The Senior Managers (SM's) are responsible for:

- 2.2.1 Complying with the requirements of the Biological Safety Policy, where applicable, and bringing this Biological Safety Policy to the attention of those within their areas of responsibility via the communication and induction channels established.
- 2.2.2 Ensuring, where applicable, that an inventory is maintained of all biological material and genetically modified organisms within the College/Institute/Department. This information should be kept up to date and include materials both in use and in storage.
- 2.2.3 Ensuring that notification occurs to the Health, Safety and Environment Team (HSET) in advance of intention to store or use any pathogens or GMOs that have not been used previously within a College/Institute and/or Department.
- 2.2.4 Appointing a Local Biological Safety Officer (LBSO) to cover those areas where biological and genetic modification work is undertaken and if activities are split between different areas of interest or different buildings it may be necessary to appoint more than one LBSO.

### **2.3 Line Managers**

*This group includes both academic and professional support staff who have responsibility for the day to day implementation of activities and the management of staff in line with the strategic direction of the particular College or Department. Examples may include section leaders, Principal Investigators (PIs), Senior Administrators etc.*

Such personnel are responsible for:

- 2.3.1 Supporting their SM's in complying with the requirements of the Biological Safety Policy, where applicable, and bringing this Biological Safety Policy to the attention of those within their area of responsibility via the communication and induction channels established.
- 2.3.2 Ensuring risk assessments, safe systems of work and local rules are prepared and adhered to and that all personnel working in those laboratory facilities shall be sufficiently trained, informed and (where necessary) supervised.
- 2.3.3 Ensuring that co-operation and co-ordination takes place, where shared laboratory facilities are in existence so that respective duties under the law are met.

## **2.4 Supervisory staff, staff and other individuals**

*This group has responsibility for directly overseeing activities of staff and/or students, but are unlikely to be responsible for developing strategic direction, e.g. a technical officer supervising a laboratory or a supervisor of a frontline service.*

Staff, students and visitors are responsible for:

- 2.4.1 Being familiar with university policy and guidance documents relating to their area of research, study or work, including, but not limited to the Biological Safety Policy, Health and Safety policy, Responsible Research Policy, and local rules designed to develop and maintain a safe working environment.
- 2.4.2 Being conversant with the risk assessments, Control of Substances Hazardous to Health (COSHH) requirements, safe system of work and local rules that apply to their work and adopt safe practices in activities involving biological material.
- 2.4.3 Reporting any incident, accident or defect in equipment relating to the handling of biological materials and cooperate with their supervisors, HSET and/or the University Health, Safety and Environment Officer or any other person appointed to monitor safety in the department.

## **3 Brunel University Health, Safety and Environment Team**

The Health, Safety and Environment Team (HSET) are the primary point of contact with all the Regulatory Authorities. All enquiries received by Colleges/Institutes and/or Directorates from any source about biological materials must be referred to the HSET who will co-ordinate and make any statutory notifications to the Health and Safety Executive (HSE); the National Counter Terrorism Security Office (NaCTSO); Home Office (HO) and any other regulatory bodies.

The University has appointed a Health, Safety and Environmental Officer (HSEO), within the HSET, to provide specialist professional guidance and advice on all aspects of Biological Safety to the University community, to ensure compliance with relevant legislation and current best practice.

The University HSET and/or HSEO is responsible for monitoring changes in legislation and guidance relevant to Biological work and, where necessary, for updating the Biological Safety Policy and associated guidance. Information on any changes shall be disseminated within the University to ensure any amendments required to local arrangements within Colleges are identified.

## **4 Reporting Structures**

The University Council is responsible for monitoring the University's system of internal control including Biological Safety, and receives information on Biological Safety Performance from the BGMSC through the Health and Safety Committee.

### **4.1 Biological Genetic Modification Safety Committee (BGMSC)**

The BGMSC is a specialist subcommittee of the University Health and Safety Committee and, on health and safety grounds, has the authority to approve, with or without modification, or to reject all work involving the use of biological materials.

The purpose of the committee is to ensure that risks associated with all activities involving the use of biological materials including genetically modified microorganisms and both humans and animal tissues are managed safely and effectively.

Any regulated activity involving GMOs, or biological material at hazard group 2 and above is only permitted with the express approval of the **BGMSC**, and provided consent has been received from the relevant enforcement agencies.

### **4.2 Human Tissue Act Compliance Sub-Committee (HTA-CSC)**

The HTA-CSC is a subcommittee of the University Research Ethics Committee (UREC). The HTA-CSC deals with matters relating to human tissue and compliance with the Human Tissue Act. The committee acts as a University forum and expert panel for issues in relation to HTA licensed research and enterprise, and ensures awareness of HTA licensed research issues throughout the University as determined by current HTA codes of best practice.

## **5 Arrangements**

Prior to undertaking any work with biological materials all employees, students and visitors must be made familiar with Brunel University London's Health and Safety Policy, as well as the University's:

- Biological Safety Policy
- Responsible Research Policy
- Risk Assessment Policy

A written risk assessment must be in place for all University research activities, either on campus or at other named and approved locations, COSHH forms must also be available.

Supporting the above, each laboratory must also have clear documented evidence of training and induction of staff, as well as local rules indicating the working practices that must be followed for activities in that laboratory, including emergency procedures and first aid provisions.

Individual workers must have access to and adhere to those local rules.

### **5.1 Risk Assessment**

Those in supervisory roles and other fund holding individuals are responsible for the health and safety of staff, students and visitors involved with their activities. They must submit a completed risk assessment to the BGMSC (and where necessary to the HTA-C SC) for peer review and approval before the start of any new project involving human tissue, a genetically modified organism or a new biological agent in hazard group 2 and above.

## **6 Monitoring and Inspection**

The University has various arrangements set out in the Health and Safety Policy for monitoring and inspection, the following refers specifically to Biological work.

### **6.1 Monitoring**

All persons with supervisory or managerial roles, and those appointed to safety related roles shall establish routine recorded monitoring practices to ensure the required safety standards are met. They must ensure that appropriate corrective action is taken to improve the situation if any inadequacy in the safety standards has been identified.

### **6.2 Inspection**

Inspections mainly involve observation of facilities and working practices and each College Dean is responsible for ensuring that College/Institute personnel carry out regular and systematic local health and safety inspections. Inspections should be recorded and any remedial action must be identified within a stated timescale.