

## **Safety Documentation**

Please select the forms you require by selecting the check boxes below. You can select more than one.

| ✓ Risk Assessment   ✓ Method Statement |
|--|
|--|

Once you have made your selections, scroll down and complete the forms.

**<u>Buttons</u>**: [+] will add a row to a list [X] will delete a row from a list

You may save this file to a local drive at any time.

When you have finished, save the file to a local drive and email it to your supervisor for authorisation.

**Supervisors** - There is a sign-off section at the end of the document set that must be completed.

Staff may "self authorise", (as a supervisor), but the forms must still be submitted to the DSO for approval.

#### **IMPORTANT:**

YOU <u>MUST NOT</u> START ANY PRACTICAL WORK UNTIL THESE FORMS HAVE BEEN RETURNED TO YOU WITH **BOTH** YOUR SUPERVISOR'S AND DSO'S APPROVAL SIGNATURES ATTACHED.

| Please compl           | ete these fields   |
|------------------------|--|
| School or Service      | Wolfson School of Mechanical, Electrical and Manufacturing Engineering |
| Department             | Centre for Biological Engineering                                      |
| Originator name        | Carolyn Kavanagh   |
| email address          | c.l.kavanagh@lboro.ac.uk   |
| Location               | CBE Laboratories ( CTMF, H34, H27,H22, H23 and H25) and T208b Wolfson  |
| Project / Activity / T | Task Use and Maintenance of the Vortex(s)                              |
| Supervisor Name        | Mark Taylor  |

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| RISK ASSESSM                | ient   | ı          | Reference  | SAF/MM/6549 |   |
|-----------------------------|--|------------|------------|-------------|---|
| Location                    | CBE Laboratories ( CTMF, H34, H27,H22, H23 and H25 | Originator | Carolyn Ka | avanagh     |   |
| Project / Activity / Task   | Use and Maintenance of the Vortex(s)               |            |            |             |   |
| Is this process risk as     | ssessment for a: Caboratory / Workshop             |            | 2          |             |   |
| Category 1: Workplac        | re   |            |            |             | + |
| Significant vibration       |  |            |            |             | x |
| Slips/Trips/Falls on the le | vel  |            |            |             | X |
| Category 2: Hazardou        | us and/or Harmful substances                       |            |            |             | + |
| Biological substancees (Ir  | nfection)  |            |            |             | X |
| Category 3: Activity        |  |            |            |             | + |
| Lone working out of hou     | rs   |            |            |             | x |
| Electrical Hazard           |  |            |            |             | x |
| Highly repetitive actions   |  |            |            |             | X |

### Explain the risks associated with these hazards

Category 4: Organisation

| People / Groups at risk Operator only  |   |                       |                                     |        | X         |
|--|---|-----------------------|-------------------------------------|--------|-----------|
| Enter risk details here:-  |   | Impact                | Probability                         | Risk S | core      |
| Mis-use of vortex  |   | Slightly Harmful      | Unlikely                            |        | Low       |
| What are the control measures?   |   | Lowers Impact         | Lowers Probability                  | +      |           |
| All CBE Laboratory users are trained o using the vortex and understand assouse.                                      |   | Moderately            | Moderately                          | x      |           |
|  |   |                       |                                     | Resid  | dual Risk |
|  |   |                       |                                     |        | Low       |
|  |   |                       | L                                   |        | LOW       |
| People / Groups at risk Operator on  | у |                       |                                     |        | X         |
| People / Groups at risk Operator on  | у | Impact                | Probability                         | Risk S | X         |
| · · · · · · · · · · · · · · · · · · ·  | у | Impact<br>  Harmful   | Probability Highly Unlikely         | Risk S | X         |
| Enter risk details here:-  | у |                       | ¬I————                              | Risk S | x         |
| Enter risk details here:- Electrical hazard  |   | Harmful               | Highly Unlikely                     | Risk S | x         |
| Enter risk details here:- Electrical hazard  What are the control measures?  All vortexs are PAT tested 2 yearly and |   | Harmful Lowers Impact | Highly Unlikely  Lowers Probability | Risk S | x         |

## Process Risk Assessment Form (Continued)

| People / Groups at risk Operator only  |                  |                    | X                 |     |
|--|------------------|--------------------|-------------------|-----|
| Enter risk details here:-  | Impact           | Probability        | Risk Score        |     |
| Lone working with vortexs  | Slightly Harmful | Likely             | Medium            |     |
| What are the control measures?   | Lowers Impact    | Lowers Probability | +                 |     |
| All Operators are fully trained before being allowed to work out of hours  | Moderately       | Moderately         | x                 |     |
| All operators have a valid out of hours risk assessment for working out of hours detailing the work. They use the lone working app.using the following link. (https://www.lboro.ac.uk/media/wwwlboroacuk/content/healthandsafety/downloads/Lone%20Working%20App% 20Instructions.pdf) | Moderately       | Moderately         | x                 |     |
|  |                  |                    | Residual R<br>Low | isk |
| People / Groups at risk Operator only  |                  |                    | X                 |     |
| Enter risk details here:-  | Impact           | Probability        | Risk Score        |     |
| Risk of infection from vortexing biological material   | Harmful          | Highly Unlikely    | Low               |     |
| What are the control measures?   | Lowers Impact    | Lowers Probability | +                 |     |
| All Biological material is contained inside lidded vials.  | Significantly    | Significantly      | x                 |     |
| All operators are trained how to vortex material safely  | Moderately       | Moderately         | x                 |     |
| Biological material is all risk assessed and has good provenance with certificates of analysis.  | Moderately       | Moderately         | x                 |     |
| Operators wear gloves  | Moderately       | Moderately         | x                 |     |
| Safety glasses worn to prevent contaminants entering the eye if lid becomes loose while vortexing.   | Moderately       | Moderately         | x                 |     |
|  |                  |                    | Residual R        | isk |
|  |                  |                    | Low               | _   |
| People / Groups at risk Operator only  |                  |                    | X                 |     |
| Enter risk details here:-  | Impact           | Probability        | Risk Score        |     |
| Risk of injury to hand from vibration or entrapment  | Harmful          | Unlikely           | Medium            | 1   |
| What are the control measures?   | Lowers Impact    | Lowers Probability | +                 |     |
| Operators are trained to use vortexs safely to avoid injury including trapping fingers in the vortex. Gloves are snug fitting so unlikely to become trapped.   | Slightly         | Slightly           | x                 |     |
| Vortexing of material occurs for very short periods at a time limiting the risk of injury from vibration.  | Slightly         | Slightly           | x                 |     |
| CBE procedure is for long hair to be tied back while working in the lab to prevent long hair becoming tangled in the equipments. Beard nets are provided for those with long beards for the same reason.   | Moderately       | Moderately         | x                 |     |
|  |                  |                    | Residual R        | isk |
|  |                  |                    | Low               |     |

### Process Risk Assessment Form (Continued)

| People / Groups at risk Operator only  |                  |                    |        | X         |
|--|------------------|--------------------|--------|-----------|
| Enter risk details here:-  | Impact           | Probability        | Risk S | core      |
| Generation of heat using vortex  | Harmful          | Unlikely           | Medium |           |
| What are the control measures?   | Lowers Impact    | Lowers Probability | +      |           |
| All users are trained how to use vortexs safely including watching out for signs that the vortex if getting warm.    | Moderately       | Moderately         | x      |           |
| The use of the vortex is for short periods at a time. Users are encouraged to switch the vortex off when not in use. | Slightly         | Slightly           | x      |           |
|  |                  |                    | Resid  | dual Risk |
|  |                  |                    |        | _ow       |
| People / Groups at risk Operator and people in proximity   |                  |                    |        | x         |
| Enter risk details here:-  | Impact           | Probability        | Risk S | core      |
| Slips trips and falls on the level   | Slightly Harmful | Highly Unlikely    |        |           |
| What are the control measures?   | Lowers Impact    | Lowers Probability | +      |           |
| Ensure that areas are kept clear and tidy and that any spills are cleared away and disposed of safely                | None             | Moderately         | x      |           |
|  |                  | -                  | Resid  | dual Risk |
|  |                  |                    |        | _ow       |
| + Add another Risk   |                  |                    |        |           |

With these controls in place, the risk is:

The activity is LOW RISK - and is effectively controlled



SAF/MM/6549

Reference

# Safety Method Statement

Carolyn Kavanagh Location CBE Laboratories (CTMF, H34, H27, H22, H23 and H25) a Originator Project / Activity / Task | Use and Maintenance of the Vortex(s) What equipment will be used in this activity? + Vortex(s) in each laboratory X • Fishebrand Vortex (T208b) Sciquip Vortex (H27) Grant Vortex (H23) Fisherbrand Vortex (H25) Fisherbrand Vortex (H22) • Biocote Vortex (H34) X Sciquip Vortex (H34) x2 Fisherbrand Vortex (H34) • Fisherbrand vortex (CTMF) x 3 Stuart Vortex (H30) Lidded vials/eppendorfs X What training must be completed to do this activity? CBE Laboratory Induction Training. Lab Leader/supervisor Training. What chemicals are being used? (These must be included in the COSHH Form) None. Any reagent used with material to be vortexed is individually risk assessed. SDS link available with the COSHH 70% IMS for cleaning (COSHH CBE 335 MEME 655) X Spill and accident procedures. SOP038 Spill Response offers guidance on how to deal with spills. Any accidents must be reported through the University accident reporting procedures. Any biological material spilled onto the vortex must be cleaned up immediately. Procedure in the event of an emergency. (How to leave the process in a safe condition in such an event) + Stop vortexing. Place vial in secure rack. Switch off the vortex. References. SOP126 Use and Maintenance of the Vortex Mixers SOP038 Biological Spill Response X

### Detailed sequential description of the process

| Process step | Precautionary measures and comments | + |
|--------------|-------------------------------------|---|
|--------------|-------------------------------------|---|

## Safety Method Statement (Continued)

| Process step  | Precautionary measures and comments   | + |
|---|---|---|
| See SOP126 for full details.  |   |   |
| Continuous operating  |   |   |
| (i) Start with speed control knob at lowest setting   |   |   |
| (ii) Push the two-direction switch towards the left to switch mixer to continuously on. Mixer will start                            |   |   |
| (iii) Turn the speed control knob to set the speed required   | Check PAT testing of appliance is in date. Check leads and equipment is safe to use.    |   |
| (iv) Push the two-direction switch to the middle to turn the mixer off  | Wear PPE  |   |
| Touch operating   | Keep vessels containing liquid vertical as much as possible                             |   |
| (i) Start with speed control knob at lowest setting   | Mix liquid using the minimum pressure required  |   |
| (ii) Push the two-direction switch towards the right to switch mixer to touch mode  | Start with the speed at the lowest setting and gradually increase to the required speed | x |
| (iii) Turn the speed control knob to set the speed required   | Reduce speed if mixer isn't running smoothly or moves on the bench                      |   |
| (iv) When a vessel is pressed into the mixing head vertically, the instrument will start. When the vessel is removed the mixer will | on the bench  |   |
| stop  | • Check instrument and vessels for damage before use.<br>Do not use damaged components  |   |
| (v) After mixing is completed push the two- direction switch to the middle to turn the mixer off                                    | Place vessel at the centre of the mixing head   |   |
| Cleaning  |   |   |
| (i) The mixer can be cleaned with 70% Ethanol   |   |   |
| (ii) Do not spray directly onto the mixer, instead spray tissue and use to wipe the machine   |   |   |
|   |   |   |



### Supervisor and Departmental Safety Office (DSO) Sign-off.

### **Supervisors**

Please check the documents above and if you want to approve them:

- 1) Electronically sign this document
- 2) Save it to a local drive (You will be prompted to do this)
- 3) eMail the signed document to the DSO.

#### **DSO**

Please review the documents above and if you want to approve them:

1) Enter the reference numbers as appropriate

| <ul><li>2) Electronically sign th</li><li>3) Save it to a local driv</li><li>3) eMail the signed doo</li></ul> | e (You will be prompt     |   |               |               |              |
|--|---------------------------|---|---------------|---------------|--------------|
|  | orm, but click the "Not   | SE THE FORMS, Approved" check-box and rem to do to put it right in th |               |               | Not Approved |
| Supervisors Signature  |                           |   |               |               |              |
|  |                           | Form Reference Nur  | mbers         |               |              |
| Risk Assessment<br>SAF/MM/6549   |                           | Method Statement SAF/MM/6549  |               | COSHH Assessr | ment         |
| DSO Signature  |                           |   |               |               |              |
| This document set m  1) After the first occurrenc 2) After any change to the                                   | e of the activity describ |   | following tim | ies:          |              |
| <ul><li>3) After any incident result</li><li>4) At least annually from the</li></ul>                           | ing from this activity    | suseu   | Nex           | kt Review:    | 20/09/2021   |
| Review comments  | ic date of approval       |   |               |               |              |
|  |                           |   |               |               |              |
|  |                           |   |               |               |              |
|  |                           |   |               |               |              |
|  |                           |   |               |               |              |