

RISK MANAGEMENT For Laboratories

Office of Safety, Health and Environment

10 May 2012



Objectives

Conduct Risk Assessment by

- Identifying hazards in laboratories,
- Evaluating risks, and
- Recommending appropriate control measures

Execute Risk Management by

- Implementing and communicating control measures
- Reviewing the effectiveness of control measures



Course Outline

- Overview of Risk Management
- Preparation Work
- Hazard Identification
- Risk Evaluation
- Risk Control
- Summary of RA Methodology
- Record Keeping
- Implementation & Review
- Effective Risk Management
- Hands-on Exercise
- Risk Assessment Assignment



OVERVIEW OF RISK MANAGEMENT



Why Risk Assessment

We need to eliminate / control risk.

We think we are safe...

Things do happen!!!





We need to know where the concerns are, and set priority....



Why Risk Assessment

- Protect Ourselves from injuries
- Prevent accidents and incidents
- >Assess if a work process is safe to proceed



- Assess the adequacy of the existing control measures
- Compliance with legal requirements
 - -Workplace Safety and Health (Risk Management) Regulations





Common Misconception

- Accident can't be prevented.
- We don't have many accidents.
- Safety is expensive.
- We are insured anyway.
- There's no hazards in my jobs.
- We are experienced.
- However,





However,

MRT worksite collapse wrecks Nicoll Highway

◆ One dead, three hurt, three missing

By SHARON LOH

A MASSIVE collapse of a Mass Rapid Transit (MRT) construction site yesterday af-ternoon wreeked a stretch of Nicoll Highway, which will now be closed for many months.

months. The mid-afternoon acci-dent near the Merdeka Bridge killed one construction work-er and injured three others. Three men were missing and feared dead. By lact aight it appeared

By last night it appeared that the accident occurred after a temporary supporting wall for a tunnel of the MRT's

Circle Line collapsed. There might have been more casualties, except that most of the site workers were

most of the site workers were having their tea break when the tragedy happened. While completion of the Circle Line now looks likely to be delayed, thousands of comhe delayed, thousands of com-muters must now use alterna-tive routes into and out of the city, and put up with conges-tion for several months while the highway is repaired. The volume of traffic dis-rupted is unprecedented, the Land Transport Authority (LTA) said.

(LTA) said. Everything happened very quickly yesterday afternoon. Thai construction worker Vehakul Somchia, 28, was bringing tools down to the site at about 3.30pm when he saw a crane and wall collapse. He dumped his tools and

ran.

"I just knew that I must get off this bridge or I would fall in and die," he said. "When the crane sank into the ground there was a man in-side."

Within minutes, the sur-rounding area caved in, leav-ing a gaping ravine 30m deep strewn with twisted steel beams, rubble, cranes and ex-

 Thousands of commuters hit Highway will stay closed for months





A 30m-deep ravine opened up within minutes of the first collapse, which has initially been blamed on a temporary supporting wall.

doned off Merdeka Bridge and sealed all roads leading to Nicoll Highway.

The impact of the accident was felt far and wide.

fighters and rescue dogs. The body of a Malaysian crane operator in his 408, Mr Vadivil Nadason, was brought out at 6.15pm, while search teams worked on to find three others believed to have been driving machinery at the bot-tom of the site when the wall came down. Three others were injured and taken to hospital. Two As Nicoll Highway sank, gas, water and electricity ca-bles snapped, causing power to go out for about 15,000 people and 700 businesses in the Marina and Suntec area. and taken to hospital. Two were later discharged from Tan Tock Seng Hospital — an Indian national, 25, and a Singaporean, 47, both with Tenants and residents in the Golden Mile Complex, near the collapsed stretch, were also evacuated.

A Thai worker, 21, with head injuries is still at the Sin-gapore General Hospital. Several callers to The Straits Times said they heard an explosion, while others Even as curious onlookers crowded the area, police cor-

reported blackouts. Though some eyewitnesses said they saw flames flash across Nicoll Highway, the LTA said it had no evidence of an explosion.

an explosion. When leaking gas was de-tected, Power Gas shut off the supply to the severed pipe, said, Mr Rajan Krishman news conference last night. The loud sound of the col-lapsing wall "might have sounded like an explosion", he said.

said. Electricity was restored at

3.50pm

The huge boom which sounded at 3.30pm sent many office workers scurrying to their windows, to be stunned by what they can by what they saw.

From his 18th-floor office at Golden Mile Tower, Mr Vincent Chan, 28, said he heard a loud sound "like a huge aircraft approaching the building".

Rushing to the window, he saw a ball of fire on the far side of Nicoll Highway.

"Then the steel reinforce-ments lying horizontally across the road started to fall into the hole one by one, like

dominoes " he said

dominoes," he said. Others ran out of their buildings for safety. Ms Sirirat, 48, a perma-nent resident from Thailand, was sewing in her shop on the first floor of the Golden Mile Complex when she heard a loud bang.

"I saw many women run-ning out of their shops," she said. "They said: 'Gas explo-sion! Run for your life'. So I followed them. I thought it was a bomb.

Speaking to reporters yes-terday, the Transport Minis-ter said the LTA would now

stabilise the ground and en-sure the buildings in the area remained secure.

"Tunnelling has been going on for many years but this has never happened before," he said.

"LTA will do its utmost to repair the damage and the rest of the Circle Line project will continue."

The LTA said it could be six to nine months before Ni-coll Highway might be opened again. opened again.

[More reports and pictures, HOME; H1-H3

Straits Times, 21 April 2004

Motorists ground to a halt in time, as a 100m stretch of the highway collapsed.

Home Affairs Minister Wong Kan Seng arrived at the scene and assured the public: "There is no indication that this is foul play." Transport Minister Yeo Cheow Tong, who came in the late afternoon, said the sur-

THERE IS NO INDICATION

THAT THIS IS FOUL PLAY."

- Home Affairs Minister Wong Kan Seng

'JUDGING FROM THE SCALE

OF THE IMPACT. IT WILL BE MANY MONTHS BEFORE WE CAN OPEN THE HIGHWAY."

- Transport Minister Yeo Cheow Tong

rounding buildings were safe, and the top priority now was the search and rescue opera-tions, involving some 75 fire-fighters and rescue dogs.



Workplace Safety & Health Act

Risk Assessment is a legal requirement under Workplace Safety and Health (Risk Management) Regulations 2006

A subsidiary legislation of the Workplace Safety & Health Act

>came into operation on 1 September 2006





Workplace Safety & Health Act

The WSH (Risk Management) Regulations require employers, the self-employed and principal (including contractor and sub-contractor) to conduct risk assessments for the purpose of identifying workplace safety and health risks and implementing measures to control the hazards and reducing the risks.

•Compliance achieved via the NUS Risk Assessment System

–Risk Assessment required for Teaching and Research work–Moving towards a Lab (OH&S) Certification Scheme



What is hazard?

Anything with the potential to cause **bodily injury**, and includes any physical, chemical, biological, mechanical, electrical or ergonomic hazard.

WSH (Risk Mgt) Reg 2006.





What is Risk?

The Likelihood that a hazard will cause a specific bodily injury to any person.

WSH (Risk Mgt) Reg 2006.

Measured in terms of: Severity and Likelihood





What is Risk?

Severity (Consequences of accident or ill health)
Degree or extent of injury or harm caused by hazard, or as a result of an accident

Likelihood (probability of accident or ill-health) The probability or frequency of an event occurring





What is Risk Assessment?

It is the process of

1. identifying safety and health hazards associated with work, (Hazard Identification)

2.assessing the level of risks involved, (Risk Evaluation)

3.prioritizing measures to control the hazards and reduce the risks (**Risk Control**)

A guide to WSH (Risk Mgt) Reg by MOM





What is Risk Management?

It is a systematic approach to:

- Assess risks associated with any work activity (*Risk Assessment*)
- Communicate these risks to all persons involved
- Control and monitor such risks

Risk Assessment is an integral part of Risk Management.



Risk Management Process Flowchart





PREPARATION WORK



Preparation Work

Preparation work includes:

- From a Risk Assessment Team and appoint a team leader with roles and responsibilities clearly defined,
- Gather relevant information
- Break down each process/procedure into successive tasks





Risk Assessment Team

Risk Assessment should be conducted by

- the one who is competent of the hazards Principal Investigator
- a team who have thorough knowledge of the work to be undertaken – PI and his/her team

Never a one man show!!!

Role of OSHE – Training & Guidelines Review of RA - HOD, safety committees





Information Needed for Risk Assessment

- Laboratory layout plan
- Process flowchart
- List of work activities in the process
- List of chemicals, equipment, machinery, tools used
- Safety Data Sheets, Operation Manuals
- Records of past incidents and accidents
- Relevant legislation, codes of practice or specifications





Information Needed for Risk Assessment

- Observations and interviews
- Past inspection records & audit reports
- Details of existing risk controls & Safe work procedures (SWPs)
- previous risk assessments
- Feedback





Break Down of Process

Break down each process/procedure into **successive tasks** as far as possible so that the hazards of each task can be identified for evaluation of safety & health risks.

If the tasks are made too general, specific operations and related hazards may be missed. Too many tasks may make the Risk Assessment impractical.

Rule of Thumb: Most experiments can be described in less than 10 tasks, normally 6 – 8 tasks.





Break Down of Process





HAZARD IDENTIFICATION



Hazard Identification

Identifying hazard is the most important step in risk assessment, because hazards can only be controlled if they are identified.





What to Identify?

- The hazard associated with the activity of each process/procedure;
- all the possible types of accidents, incidents and/or ill-health that can occur due to the hazards; and
- identify potential persons-at-risk





Hazard Identification Methods



Substance Based

Procedural Based



Equipment Based





Scope of Hazard Identification

Should consider :

Routine/Non-routine Activities

Normal/Abnormal/Emergency Conditions

Normal Condition: situation whereby the outcome is within expectation without any deviation whatsoever

Abnormal Condition : situation whereby the outcome is beyond expectation and can be normalized easily

Emergency Condition : Situation with catastrophic effect and external parties are needed to normalize the situation





What are the Hazards in a laboratory?

- Chemical
- Biological
- Radiation
- Mechanical
- Physical
- Environmental
- Energy
- Human factor





Chemical Hazards

- Flammability;
- Explosive nature;
- Toxicity;
- Carcinogenic;
- Teratogens;
- Mutagenic;
- Asphyxiant;
- Irritants

Where can such information be obtained?





Biological Hazards

- Animals (poisons vs physical wounds)
- Infection (pathogenic bacteria, viruses, molds)
- Health care facilities, waste treatment operations, normal field activities
- Sharps, biological equipment





Radiation Hazards

Ionizing sources

 Alpha particles, beta particles, gamma rays, x-rays (Half life, quantity, type of radiation)

Non – Ionizing sources

 Sun lamps, arc welding, lasers (class of laser), sonicators





Mechanical Hazards

- Protrusion
- Sharp Edges
- Moving Parts/machinery
- Nipping or Pinch Points
- Acceleration (Inadvertent motion)
- Deceleration (Sudden stops)
- Vibration
- Falling weight





Physical & Environmental Hazards

- Weather
- Radiant heat (Furnace)
- Cold environment
- Noise
- Ventilation
- Vibration
- Lighting
- Poor housekeeping





Energy Hazards

• Electrical

(Overloading, exposed wires, inadvertent activation, non-approve appliances)

• Pressure

(Loose connection for hydraulic / pneumatic, residual energy)

• Fire

(Non-compatible storage or activity, excessive flammable or combustible materials)




Human Factors

- Fatigue
- Stress
- Lack of concentration
- Lack of skills
- Not fit for job
- Attitude problem





Possible Accident / III-Health (Consequences)

- Minor injury
- Fatality
- Electrical shock
- Electrocution
- Poisoning
- LAI
- Chronic diseases
- Skin corrosion
- Skin cancer

- Lung burning
- Eye injury
- Cuts
- Hit by moving objects
- etc



Hazards & Consequences

Hazard Identification for Laser Alignment

No	Description/Details of Steps in Activity	Hazards	Possible Accident / III Health & Persons-at-Risk
1	Turn on Class IV laser system	Contact with wet hands	Electrical shock
2	Perform alignment work	Accidentally hit by a stray beam	Permanent eye damage
			Skin sustain laser burn
3	Turn off Class IV laser system	Contact with wet hands	Electrical shock



Hazards & Consequences

Hazard Identification for Extraction of DNA from Human Cells

No	Description/Details of Steps in Activity	Hazards	Possible Accident / III Health & Persons-at-Risk
1	Get vials from Liquid nitrogen	Possible Exposure to liquid nitrogen	Frostbite-damage skin & underlying tissue
2	Thawing of human cells (commercial - ATCC) stored in liquid nitrogen	Breakage/explosion of vial due to the temp difference	Eye injury due to explosion of vials
		Exposure to human bloodborne pathogens (BBP) - (e.g. HBV, HCV, HIV etc.) from human cells- (Risk Group 2)	Lab acquired infection-BBP
3	Centrifugation of cells	Exposure to aerosol	Infection-BBP
		Explosion of centrifuge if the rotor fails while in use	Bodily injury
4	Extraction of DNA from the cells using Phenol- Chloroform mixture	Exposure to chemicals-eg; Chloroform	 Cause dermatitis Cause reproductive damage <u>Carcinogen</u>



Hazards & Consequences <u>Fabrication of Nanofibrous Scaffold by Electrospinning</u>

No	Description/Details of Steps in Activity	Hazards	Possible Accident / III Health & Persons-at-Risk
1	Preparation of solution by dissolving polymer materials into a solvent [such as HFP (1,1,1,3,3,3 hexafluoro-2- propanol)]	Chemical hazard-corrosive, irritant- accidental inhalation of HFP & skin contact by spilled solvent	Chemical burn, skin irritation, may produce severe irritation to respiratory tract
2	Grind the tip of needle in order to collect nanofiber	Mechanical hazard when grinding the sharp needle tip	Minor cuts on fingers due to needle prick
3	Set the parameters, pour solution into syringe and connect the circuit	Chemical hazard-corrosive, skin irritant, accidental inhalation of HFP & skin contact by spilled solvent	Chemical burn, skin irritation, may produce severe irritation to respiratory tract
4	Switch on high voltage and spinning the fiber	Electrical Hazard-Potential contact with live electricity	Electrocution, body burns
		Chemical hazard-Inhalation of solvent vapour	Respiratory problem
5	Stop spinning/collect fiber	Chemical hazard-exposure to solvents	Chemical burn, respiratory problem
6	Disposal of remaining solvent and syringe	Chemical hazard-exposure to solvent vapour & contact with spilled solvent	Chemical burn, skin irritation, Respiratory problem
		Human factor-Lack of concentration	Minor cuts on the hand due to being prick by the used needle syringes



Person at Risk

- Persons directly involved in the experiment
 / operation
- Persons not directly involved in the experiment / operation
- Visitors
- Members of public

Involve all students, lab techs, professors, researchers, etc.



Hazard Identification – Exercise





Hazard Identification – Exercise







RISK EVALUATION



Risk Evaluation

- 1. Identifying the existing control measures
- 2. Assessing the potential **severity**
- 3. Assessing the likelihood
- 4. Determining the risk level





Risk Components





Assessing the Severity

Score	Severity	Description
1	Low (Minor)	No injury, injury or ill-health requiring first aid treatment only - includes minor cuts and bruises, irritation, ill-health with temporary discomfort
2	Medium (Moderate)	Injury requiring medical treatment or ill-health leading to disability, includes lacerations, burns, sprains, minor fractures, dermatitis, deafness, work-related upper limb disorders
3	High (Major)	Fatal, serious injury or life-threatening occupational disease, includes amputations, major fractures, multiple injuries, occupational cancer, acute poisoning and fatal diseases

*() – Term use by MOM

Severity normally will not change unless there is a physical change to the equipment or process.



Determining the Likelihood

Score	Likelihood	Description	
1	Unlikely	Not likely to occur (has not occurred in the PI's	
	(Remote)	Lab or similar Lab setup)	
2	Possible	Possible or Known to occur (has occurred in the	
	(Occasional)	PI's Lab or similar Lab setup)	
3	Likely	Common or repeating occurrence (has occurred	
	(Frequent)	repetitively in the PI's Lab or similar Lab setup	

*() – Term use by MOM

The team should rely upon their experience and consider realistic scenarios: •Past experience / incidents

•Complexity of the activity

•Number of personnel involved in the activity (e.g. all personnel, a limited number of trained personnel, etc)

•Frequency of use or execution

•Degree of control (involvement of contractors)

•Strength/completeness of administrative controls

Sufficiency/formality of training

•Other....



Evaluate Risk Level

<u>Risk = Severity x Likelihood</u>

Vary from 1 to 9

< 3 -Acceptable Residual Risk

3,4 -Consider Additional Risk Control

>4 - Additional Risk control Required

- Low

- Med

- High

			Likelihood	1
		Likely (3)	Possibly (2)	Unlikely (1)
ť	Low (1)	3	2	1
everit	Medium (2)	6	4	2
Se	High (3)	9	6	3



Risk Assessment for Laser Alignment

No	Description/Details of Steps in Activity	Hazards	Possible Accident / III Health & Persons-at-Risk	Existing Risk Control	S	L	RL
1	Turn on Class IV laser system	Contact with wet hands	Electrical shock	Period check of equipment	1	1	1
2	Perform alignment work	Accidentally hit by a stray beam	Permanent eye damage	Laser curtain Access control Protective eye wear	3	1	3
			Skin sustain laser burn	Laser curtain Access control	2	1	2
4	Turn off Class IV laser system	Contact with wet hands	Electrical shock	Period check of equipment	1	1	1



Risk Assessment for Extraction of DNA from Human Cells

No	Description / Details of Steps in Activity	Hazards	Possible Accident / III Health & Persons-at-Risk	Existing Risk Control	S	L	R L	Additional control
1	Get vials from Liquid nitrogen	Possible Exposure to liquid nitrogen	Frostbite-damage skin & underlying tissue	Use cryogloves & face shields	2	1	2	
2	Thawing of human cells (commercial- ATCC) stored in liquid nitrogen	Breakage/explosion of vial due to the temp difference	Eye injury due to explosion of vials	Use cryogloves, face shield & lab coats when handling frozen vials.	S	1	S	
		Exposure to human bloodborne pathogens (BBP)- (eg; HBV, HCV, HIV etc.) from human cells- (Risk Group 2)	Lab acquired infection-BBP	Work in a BSL-2 lab, Use Biosafety cabinet (BSC) –class II, goggles & lab coat	3	2	6	Hepatitis B vaccination (occupational health programme)

Continued...



Risk Assessment for Extraction of DNA from Human Cells

No	Description / Details of Steps in Activity	Hazards	Possible Accident / III Health & Persons-at-Risk	Existing Risk Control	S	L	R L	Additional control
3	Centrifugation of cells	Exposure to aerosol	Infection-BBP	Loading & unloading of centrifugation tubes inside BSC, use centrifugation safety cups	2	1	2	
		Explosion of centrifuge if the rotor fails while in use & loads are not evenly balanced	Bodily injury	Balance the centrifuge cup, Refer to centrifuge SOP for the use	3	1	3	proper training on the use & maintenance of centrifuge
4	Extraction of DNA from the cells using Phenol- Chloroform mixture	Exposure to chemicals-eg; Chloroform	 Cause dermatitis Cause reproductive damage <u>Carcinogen</u> 	Use safety glasses & gloves, Handle inside a Fume- hood	2 3 3	1	2 3 3	



Fabrication of Nanofibrous Scaffold by Electrospinning

No	Description/Details of Steps in Activity	Hazards	Possible Accident / III Health	Existing Risk Control	S	L	RL
1	Preparation of solution by dissolving polymer materials into a solvent [such as HFP (1,1,1,3,3,3 hexafluoro-2- propanol)]	Chemical hazard- corrosive, irritant- accidental inhalation of HFP & skin contact by spilled solvent	Chemical burn, skin irritation, may produce severe irritation to respiratory tract	Handle in Fume hood; usage of PPE (e.g. goggles, gloves, mask, lab coat); Training,	2	1	2
2	Grind the tip of needle in order to collect nanofiber	Mechanical hazard when grinding the sharp needle tip	Minor cuts on fingers due to needle prick	Training; maintenance of the grinding machine; and usage of PPE and sharp container	2	1	2
3	Set the parameters, pour solution into syringe and connect the circuit	Chemical hazard- corrosive, Skin irritant, accidental inhalation of HFP & skin contact by spilled solvent	Chemical burn, skin irritation, may produce severe irritation to respiratory tract	Handle in Fume hood and Usage of PPE like mask or respirator	2	1	1



Fabrication of Nanofibrous Scaffold by Electrospinning

No	Activity	Hazards	Possible Accident / III Health	Existing Risk Control	S	L	RL
4	Switch on high voltage and spinning the fiberElectrical Hazard-Potential contact with live electricityElectrocution, body 		3	1	3		
		Chemical hazard- Inhalation of solvent vapour	Respiratory problem	Handle in Fume hood; usage of PPE like mask or respirator	2	1	2
5	Stop spinning/collect fiber	Chemical hazard- exposure to solvents	Chemical burn, respiratory problem	Usage of PPE; Leaving it in the fume hood for 20mins before collecting the fiber	2	1	2
6	Disposal of remaining solvent and syringe	Chemical hazard- exposure to solvent vapour & contact with spilled solvent	Chemical burn, skin irritation, Respiratory problem	Usage of PPE, Leaving it in the fume hood overnight; store in special container; disposal is later done by licensed collector	2	1	2
		Human factor-Lack of concentration	Minor cuts on the hand due to being prick by the used needle syringes	Stored used syringe in special container until final disposal	1	2	2



RISK CONTROL



Risk Control

- 1. Identify all reasonably practicable measures by eliminating or reducing the risk level.
- 2. Implement the control measures.
- 3. Review continually to ensure their effectiveness.





Reasonably Practicable

- ✓ An action is considered to be practicable when it is capable of being done.
- ✓ Whether it is also reasonable takes into account:
 - Severity of injury/harm/ill-health
 - Degree of risk (or likelihood)
 - Knowledge of hazard and the ways of eliminating, reducing or controlling it
 - Availability, suitability and cost of safeguards.



Risk Control

 Based on the risk level, select additional risk control measures to reduce the risk level to an acceptable level.



 When the risk level is High, implement effective and practicable risk control to bring down the "High Risk" to at least "Medium Risk".





Acceptability of Risk

Risk	Risk	Recommended Actions
Low Risk <3	Acceptable	No additional risk control measures may be needed. However, frequent review may be needed to ensure that the risk level assigned is accurate and does not increase over time.
Medium Risk 3, 4	Moderately acceptable	A careful evaluation of the hazards should be carried out to ensure that the risk level is reduced to as low as is practicable within a defined time period. Interim risk control measures, such as administrative controls, may be implemented. Management attention is required.
High Risk >4	Not acceptable	High Risk level must be reduced to at least Medium Risk before work commences. There should not be any interim risk control measures and risk control measures should not be overly dependent on personal protective equipment or appliances. If need be, the hazard should be eliminated before work commences. Immediate management intervention is required before work commences.



Hierarchy of Controls





Elimination

- •Removes the source of the hazard from the work area;
- •Most effective measure because the risk is eliminated;
- •A permanent solution should be attempted first.
 - Choose different process;
 - Modify an existing process by changing the energy type;
 - Modify or change equipment or tool;
 - •Remove a radiation source from common lab area to a proper store;
 - •Moving flammable solvents from common lab area into a flammable cabinet in a solvent store.



Substitution

- Replaces the hazardous work process or material with a less hazardous one.
- Very effective, especially for hazardous substance.
 - Replace solvent by water-based solution
 - Use a chemical of higher LD50 or PEL;
 - Micro-scale experiments / Computer simulation;
 - Substitute vapor heating by electric heating;
 - Use electronic control instead of pneumatic one;
 - Use a non-sparking hammer in a flammable atmosphere instead of a steel hammer;
 - Replace Benzene with Toluene;
 - Use a biological agent of lower risk group.





Engineering Control

Engineering controls are physical means that limit the hazard.

- Biological Safety Cabinet, Local Exhaust ventilation, Fume cupboard, etc
- Centrifuges safety cups
- Interlocks
- Safety Guards
- Primary barrier to prevent exposure by containment
- Electrical Leakage Circuit Breaker (ELCB)
- Safety Alarms







Administrative Controls

Administrative controls reduce or eliminate exposure to a hazard by adherence to procedures or instructions.

- Standard Operating Procedures, signage, etc
- Survey/Wipe tests verification tests, hygiene monitoring
- Occupational Health vaccinations/immunizations
- Training and Education
- Labeling
- Inspections and Audits
- Maintenance of Equipment







Personal Protective Equipment (PPE)

- PPE may be required to reduce the risk of exposure of a staff or student by contact, inhalation or ingestion of an infectious agent, toxic substance, or radioactive material.
- Provide a <u>barrier</u> against hazards to protect laboratory workers from injury risk
- PPE is the last line of defense









Examples of Common PPEs

- 1. Lab coat
- 2. Gloves
- 3. Covered shoes
- 4. Safety Glasses
- 5. Safety Goggles
- 6. Face Shields
- 7. Respirators





Residual Risk

- Residual risk are the **remaining risk** for which the planned risk controls are not able to effectively remove or control.
- All **reasonably practicable measures** must be taken to further reduce the residual risks, e.g. training (administrative control).
- The risk assessment team should highlight the residual risks for each of the controls.
- The lower the control in the hierarchy is selected, the higher is residual risk.





Summary



Principle of Crocodile

Identify the risk





Principle of Crocodile

Evaluate the risk





Principle of Crocodile

Eliminate the risk


Substitute the risk





Isolate the risk (Engineering Controls)





Implement administrative controls



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Use Personal Protective Equipment



Or else.....Run away !





RECORD KEEPING



Record Keeping

- All Risk Assessments should be properly recorded in a **Risk Assessment Form**.
- All relevant information must be made **available for inspection**.
- Keep record for at least 3 years.





Record Keeping

Records should be concise and include the following information:

- 1) Members of the Risk Assessment team,
- 2) Processed/procedures/tasks/activities involved,
- Hazard identification and possible accident/ill-health and person at risk,
- 4) Existing risk control measures,
- 5) Risk level of each hazard,
- 6) Recommendation on additional risk control measures,
- 7) Persons responsible to implement the measures & completion date,
- 8) Signature, date & designation of persons conducting the Risk Assessment;
- 9) Signature, date & designation of management approving or endorsing the Risk Assessment.





Risk Assessment Form

	Experiment-Based Risk Assessment Form										
	Name of Department			Location of Lab							
	Name of Laboratory			Name of Pl							
	Name of Researcher/LO	ne of .earcher/LO		Name of _Activity/Experiment							
No	Description/Details of Steps in Activity	Hazards	Possible Accident / III Health & Persons-at-Risk	Existing Risk Control (Mitigation)	Severity	Likelihood (Probability)	Risk Level	Additional Risk Control	Person Responsible	By (Date)	
1							0				
2							0				
3							0				
4	-										
6							0				
7							0				
8							0				
9							0				
10							0				
Conducted By Approved By											
	Name										
		Signature									
		Approval date					_ Next Revision date (Maximum 3 years)				



IMPLEMENTATION & REVIEW



Implementation

- The results of Risk Assessment should be **approved** and endorsed by PI.
- The PI should **implement the recommended risk control measures** without undue delay, as far as it is practicable.
- Implement the risk controls by apply **ALARP** concept and the **hierarchy of controls**.
- Train the affected staff/students on the Risk Assessment findings and the controls to minimize the risk of injury and ill-health with their awareness and support.
- Establish an implementation schedule to ensure that the risk control measures are implemented in due time.





Mandatory Review

Review or revise the Risk Assessment:

- At least once in every 3 years
- After any accident or serious incident occurs
- When there are **changes** in the Laboratory (Management of Change)





Review after Accident or Serious Incident

Reportable cases to MOM

- n Workplace accident
- Dangerous occurrence
- Occupational disease

OSHE list of accident/incident categories link:

https://staffweb.nus.edu.sg/oshe/category.htm





Review after Accident or Serious Incident

>Other indicators for review:

- MC given by Doctor
- Property damage
- Environmental non-compliance



 Risk levels should be reviewed taking into consideration the resulting severity:
 No. of days of MC
 Extend of property damage
 Extend of environmental pollution



Management of Change

Review and revise Risk Assessment when:

- new equipment / materials / chemicals / agents are brought into your lab;
- **parameters are changed**, e.g. change of equipment setting, change of concentration/volume of chemicals, etc;
- new or revised processes / procedures / working practices are implemented in your lab;
- When new persons join your lab / change of competency;
- your lab is relocated;
- additional risk control measures are introduced;
- risk control measures are changed/revised.
- Etc.





Communication

Staff/students or any other persons in the lab who may be exposed to the risk should be informed of:

The nature of the risk involved,
The measures implemented to control the risk,
Applicable SWP/SOP,

Whenever the **risk assessment is revised**, or when there is a **significant change** in work practices or procedures, the staff/students or other persons who may be at risk must be informed accordingly.







EFFECTIVE RISK MANAGEMENT





Select Suitable Risk Assessment Team

- •PI
- •Lab Sup / Tech
- Researchers
- •Students
- •Competent
- •Experienced
- •Trained



Communication

•Appropriate approach

- Intranet
- Induction

•Communicate risks and control measures

•Address concerns of the persons at risk



Training

•Training plan

Departmental training

•SSTS

•SMS training



Integrate into Existing Process

•Existing Policy / SOP

- •Training procedure
- Incident/Accident investigation

•Audit



Risk Treatment

- •Risk Control
- •Risk Mitigation
- To consider:
- •Effective and efficient internal controls
- •Compliance with laws and regulations
- •Cost effective



Record Keeping

- •Ease the documentation process
- •Working paper as records
- •Softcopies
- •Filing system



Technology Support

- •Equipment with in-built safety features
- Less hazardous materials
- •Software application



Regular Monitor & Audit

Review structure & process
Provide updated information
Improve knowledge
Provide assurance



Conclusion

Benefits of effective Risk Management:

- Safer laboratory
- •Effective & efficient research
- Quality working environment
- •Highly motivated staff & students



HANDS-ON EXERCISE



Hands-on Exercise

- Use the Risk Assessment Form
- Determine an experiment/procedure to work on.
- Identify the hazards and evaluate the risk level.
- Determine additional control measures, if necessary, and indicate responsible person and completion date.
- Present your Risk Assessment result.



ASSIGNMENT



Risk Assessment Assignment

- Form a team of not more than 4 persons.
- Use the **Risk Assessment Assignment Form** (<u>http://www.nus.edu.sg/osh/training/download.htm</u>).
- Determine an experiment/procedure to work on (choose a different one from the hands-on exercise).
- Identify the hazards and evaluate the risk level.
- Determine **additional control measures**, if necessary, and indicate **responsible person** and **completion date**.
- Please use the **softcopy** to complete.
- You may **attach a short description** of the Risk Assessment.
- Submit to OSHE within 2 weeks via Email.



Marking Criteria

• Complete identification: (25 marks)

The list of break down of process/ procedure/ experiment and hazard identification are complete. The process/ procedure/ experiment should be broken down into 6-8 tasks, not less than 4 tasks.

• Clear description: (25 marks)

The description of "Hazard" and "Possible Accident/ III-Health & Person-at-Risk" is clear and easy to understand.

Correct scoring: (25 marks)

- Scoring of "severity" and "likelihood" and calculation of risk level are correct.
- Adequate & effective additional controls: (25 marks) Additional control measures suggested are adequate and effective, if necessary.
 - Passing Marks: 75 marks.



