Background Notes to the Code of Practice - Draft 5 - Version 5

This Code of Practise for Exempt Laboratories in Universities and Crown Research Institutes provides a means of compliance to meet the requirements of the HSNO (Exempt Laboratory) Regulations, 2001.

The Steering Group was mindful of submissions made at the previous round of consultation. After liaising with ERMA representatives, the Steering Group has attempted to follow the intent of the Regulations and we hope in doing so have provided you with a document that it easier to understand and less complicated. You will note that the Code has gone through at least 12 different amendments since the last consultation document. We hope to have removed formatting errors. However, in the rush to rewrite some errors may still be embedded in the document. Our apologies if these are present.

Readers should be mindful that the Code of Practice provides a method by which users can comply with the HSNO (Exempt Laboratory) Regulations. Wherever possible, the Code has interpreted the regulations to provide a workable solution.

There are a number points that the reader should be aware:

1. **The Code is still Provisional**
Some areas of the code are currently being considered by ERMA. Some methods of compliance are therefore not settled or a finalised. Inventory and the position of HSNO Lab Facility Director are two such issues. Nonetheless we would appreciate your comment on these issues (see below).

2. **Building as a Laboratory**
The HSNO Act allows laboratories to be a room or a building. Each interpretation has a number of ramifications (please consult document “What is a laboratory?” for background discussion on this subject).
If a building (or a part thereof) is considered a laboratory, then many of requirements for locking individual rooms inside the building and the signage requirements become less stringent. This has obvious advantages for high use facilities such as Chemistry Department. As you will see the Building as a laboratory has been termed the HSNO Laboratory Facility. This terminology has been used simply to avoid nomenclature difficulties.
If a building (or a part thereof) is considered a laboratory, the requirement for ensuring that a laboratory manager (or delegated person) to be present at all times while the building is unlocked becomes more problematic (i.e. who is the lab manager at any given time?). The Steering Group considered this problem and the fact that the building, floor or part of the building would undoubtedly have a manager in charge (be it a Senior Manager, Head of Department) and have suggested that the “Lab manager of the Building” be this person. To avoid ambiguity the Code suggests this manager is called the HSNO Laboratory Facility Director. Organisations can use another title if they wish.
3. Inventory
The Steering Group has provided two provisional methods of compliance. We are very interested in your comments about one or either of these methods.

4. Level of Prescription in the Code
Some submissions in the last round of consultation commented that they thought the Code was too prescriptive. There are two reasons for this level of prescription. Firstly the Code is primarily a method of compliance (a "how to" if you will) and as such it is designed to provide detail. Secondly, following a Code of Practice under the HSNO Act is means of legal defence. Stipulation of detail removes any ambiguity in interpretation. Ambiguity could result in the Code becoming a spear rather than a shield.

5. Applicability to the Laboratory Bench
The Steering Group was mindful that the Code was attempting to cover a number of situations in both CRIs and in Universities. This clearly a difficult task and one, which if attempted, would result in an unwieldy document. The Code, while a useful document in the lab, is primarily aimed at Health and Safety Practitioners in each organisation. It was envisaged that each organisation could then flesh out details for the requirements of the Emergency Plans and customise their own Safe Method of Use.