

Pyrophoric Substances Policy

Pyrophoric substances are extremely reactive and can ignite spontaneously on contact with air; reacting with oxygen, moisture in the air or both. Failure to follow proper handling procedures can result in fire or explosion leading to serious injuries/death or significant damage to facilities.

Pyrophoric chemicals are classified under Labelling and Packaging of Substances and Mixtures Regulations' (CLP). Under the CLP Regulations they are assigned the Hazard Statement H250 '*Catches fire spontaneously if exposed to air*', or the Hazard Statement H260 Contact with water releases flammable gases which may ignite spontaneously, (ie moisture sensitive)

This Policy applies to the use and storage of all pyrophoric substances in connection with University activities. This Policy is supported by arrangements, instructions, and guidance on the management of pyrophoric materials which are available on the University's Health and Safety web pages.

Under the provisions of Ordinance 18, 'Health and Safety in the University', it shall be a duty of all staff, students and others working in the University to comply, as far as it is appropriate, with 'The Statement of Health and Safety Policy', together with any other rules and guidance that may apply. This Policy, together with supporting arrangements, instructions and guidance, form part of the rules and guidance issued pursuant to 'The Statement of Health and Safety Policy'.

Core Principles

1. Suitable and sufficient risk assessments must be made for any pyrophoric substances, which if not properly controlled might cause harm to people as result of fire or explosion.
2. The assessment must evaluate the adequacy of existing precautions, identify any additional precautions required and include actions to take in the event of a spillage and discovery of a material fire.
3. Workspaces where pyrophoric materials are stored must be identified within the QuEMIS Hazards Module, and relevant hazard and risk information included within the module entry.
4. Appropriate signage or 'Notice Boards' will be displayed at the entrance to these workspaces.
5. Personal protective equipment must be worn whenever handling pyrophoric chemicals.
6. Control measures will include, but not limited to: storage management procedures to ensure material remains stable, reducing sources of oxygen and moisture, suitable engineering controls, general safety precautions, appropriate information and training.
7. Engineering control measures must be suitable for pyrophoric materials and must be subject to suitable maintenance programme to ensure they remain in good working order, and records maintained.

8. All those handling these reactive chemicals must be trained in their safe use and correct laboratory technique by or under the supervision of a suitably experienced colleague assigned by their Principal Investigator and be able to demonstrate proficiency.
9. Records must be kept of all risk assessments undertaken, information and instruction provided and all checks and maintenance carried out on safety measures and equipment. Regular reviews will be undertaken to ensure the information etc, remains suitable.

Responsibilities

Heads of Departments are responsible for the implementation of this Policy with regard to the use and storage of pyrophoric materials within their respective areas.

All Principal Investigators must develop their own lab Rules or work together to develop Lab Rules for their laboratory where the space is shared with other groups. These rules must be communicated to all who use or have a need to enter the space.

All staff within departments must comply with this Policy and the associated arrangements, instructions and guidance.

The Director of Health and Safety is responsible for advising on the standards and regulations that must be achieved in order to meet legal requirements; for keeping the University's Health and Safety website up to date with the related policy documents; and for ensuring that spot checks and audits are carried out to provide assurance that activities are being carried out in compliance with this Policy.

Review

This policy is dated March 2019. The policy will be reviewed at least annually.

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