Biosafety Standard Work Practices Schedule

1 Purpose

To set out standard work practice expectations when undertaking activities involving biological material.

2 Scope

This schedule applies to all University Members, including Employees, Students, Contractors, and Visitors conducting work with biological materials or accessing spaces where biological activities occur. These work practices must be applied as minimum practice within all facilities where biological work is carried out.

This schedule must be read in conjunction with the Biosafety Procedure and is subordinate to it.

3 Schedule

3.1 Hygiene

Eating, drinking, the application of cosmetics and chewing gum or cough lollies is strictly prohibited in University laboratory spaces and when handling biological materials.

Laboratory fridges must not be used to store any items for human consumption. Fridges must display a sign 'not for human consumption'.

3.2 Mobile Devices and Related Equipment

Mobile phones are permitted for emergency use (i.e. SafeZone application) and for researching or teaching documentation provided that all of the following rules are observed:

- Gloves must be removed, and hands decontaminated prior to touching the mobile phone.
- When mobile phones are not in use for the mentioned purpose, they must be stored in the laboratory gown pocket or other designated space protected from contamination. It is recommended that the mobile phone be stored in a snap lock plastic bag to further reduce the risk of contamination.
- If a mobile phone becomes potentially contaminated, the phone must be decontaminated with sanitising wipes, or other satisfactory decontamination technique,

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prior to leaving the laboratory.

Regulated laboratories must follow certification requirements for mobile devices and related equipment.

3.3 Personal Protective Equipment (PPE)

PPE must be worn in the laboratory as outlined below. Additional PPE may be required depending on the biological material being used or procedures being undertaken, this should be established in the Risk Assessment process.

3.3.1 Eye protection

- Safety glasses must be worn at all times when handling biological materials. Specialised safety glasses or a face shield may be required for specific tasks as outlined in the Risk Management Plans (RMPs), SOPs or as instructed by the Appointed Facility Officer.
- Where it may be considered impracticable to wear safety glasses for a task, an approved RMP must be in place to qualify an exemption (e.g. specific microscope use).
- Safety glasses must not be shared between users unless they have been disinfected.
- When safety glasses are not in use, they must be kept in the laboratory gown pocket or a dedicated individual storage unit unless undergoing disinfection.

3.3.2 Gloves

- Gloves must be worn at all times when handling biological materials
- Unique gloves may be required for certain practices (e.g. chemical resistant gloves) which should be identified during the Risk Assessment process.
- Gloves must be disposed of through the appropriate clinical waste pathway, not in general waste

3.3.3 Laboratory Coats/Gowns

- Individual laboratory coats must be used.
- Laboratory coats are to be removed, and hands decontaminated before moving to areas outside the laboratories.
- Laboratory coats must not be worn outside the laboratory. This includes between

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buildings, stairwells, lift spaces, courtyards, and cafeterias. If a laboratory gown is required for work outside the biological laboratory, then a clean laboratory coat must be worn.

- Laboratory coats must be hung individually at the provided location near the laboratory exit (for Researchers and teaching staff) or stored in individual plastic bags or containers (undergraduate Students).

- Laboratory coats from laboratories with incompatible biological risk profiles must be segregated to reduce the risk of cross contamination.

- Unused, clean laboratory coats must be stored in a separate area to laboratory gowns in use, where they cannot be contaminated by biological materials or chemicals.

- Undergraduate laboratory coats removed from the University, must be stored in a sealed and labelled container or bag.

- All Employee laboratory coats must be retained and stored at the University.

3.3.4 Cleaning of PPE

Laboratory coats and safety glasses must be cleaned routinely as appropriate to the risk rating of the organism and laboratory containment rating. In order of descending risk:

- **Regulated laboratories:** Approved Arrangement (AA) and Office of the Gene Technology Regulator (OGTR) Certified PC 2 laboratories must follow the authority instructions required to maintain certification.

- **Physical Containment 2 (PC2) non-regulated laboratories:** In PC2 laboratories where Risk Group 2 (RG2) organisms may be handled or in Physical Containment 1 (PC1) laboratories where RG2 organisms have been approved for use in biological safety cabinets.

    - Gown laundering and safety glasses cleaning may be conducted in house in dedicated facilities with appropriate disinfection (i.e. chemical disinfection agents such as Trigene or Napisan); or

    - Conducted commercially by a qualified company.

- **Physical Containment 1 (PC1) non-regulated laboratories:** In teaching or Research laboratories where only Risk Group 1 (RG1) organisms may be handled, laboratory gowns and safety glasses may be laundered inhouse in dedicated facilities, cleaned by the Student/s following an approved laboratory coat cleaning protocol or commercially cleaned (gowns).

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3.3.5 PPE Removal

PPE shall be removed and hands decontaminated in a predetermined and appropriate sequence, with consideration to potential contamination loading, before leaving the laboratory. The typical order is:

1. Removal of gloves;
2. Laboratory coat;
3. Eye protection; then
4. Hand decontamination

3.4 Extraction Cabinet Rules (Biological Safety Cabinet, Laminar Flow and Fume Cupboards)

The following rules apply to Biological Safety Cabinets (BSC's), Laminar Flow and Fume Cupboards:

- Under no circumstances are chemicals to be used in BSC other than those required for disinfection or biological procedures.
- Under no circumstances are chemicals to be stored in a BSC.
- A fume cupboard must be used when working with chemicals that present a chemical inhalation risk, as identified through the Risk Assessment process.
- A fume cupboard should not be used for handling biological materials, unless identified through the Risk Assessment process
- A laminar flow may be used only when working with a sterile cell culture that does not contain a biological hazard.

3.5 Biological Material Handling Practices

The following practices are regarded as key risk reduction processes to reduce the risk of exposure to biological materials. All Students and Employees must comply with the following practices where applicable to their learning or Research Activities. Deviations or preferences must be addressed in the relevant RMP.

- All clinical and diagnostic specimens shall be regarded as potentially hazardous.

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- Leaking containers must be handled in a biological safety cabinet when practicable. The outside of the container must be decontaminated as appropriate according to the potential pathogen and risk level.

- Where possible, the use of sharps such as syringes, needles and scalpels must be minimised.

- Where infectious material is being injected under high pressure, luer-lock fittings should be used to reduce the risk of splash back.

- Laboratory doors must remain closed at all times. Propping doors open is prohibited.

- Aerosol production must be minimised, particularly where work is carried out on the open bench. If aerosols may be produced, a Biological Safety Cabinet must be used.

- Mouth pipetting is strictly prohibited in all Research and teaching settings.

- All containers of viable microorganisms must be double contained and sealed within an unbreakable plastic container (which can be readily decontaminated) during movement from one laboratory to another. This also applies when demonstrating RG2 organisms to undergraduate Students in PC1 teaching laboratory spaces.

- Diagnostic kits, control sera and products manufactured from microbiological sources must be handled with care as infectious microorganisms may be still present.

- Culture management (to be read in conjunction with section 3.7 Biological Materials Storage and Inventory):

    - Biological and cell cultures must be submitted and approved through the relevant Risk-Level approval process prior to commencement of work

    - Clearly identify and date cultures.

    - Minimize the time for which cultures are kept on the bench.

    - Transfer the culture to a dedicated storage area, such as a refrigerator or part of a cold room.

    - Cover or seal cultures of spore-producing fungi as appropriate to prevent dispersal.

    - Never sniff bacterial cultures.

- Ensure all surfaces and materials are effectively disinfected after the completion of work with methods appropriate to the biological materials being used.

- A 'Notice of Experimental Activity Card' accessed via Safety Central must accompany experimental biological work in progress that is unattended for any length of time. The

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card must provide Information that is appropriate and relevant to the type of work in progress and (as a minimum) provide the following information:

- the nature of the work in progress including the biological risk; and
- key safety and emergency Information; and
- Name and contact details of the person responsible for the work and an emergency contact number(s); and
- critical first aid Information if applicable.

3.6 Cleaning and Decontamination

3.6.1 Housekeeping

Employees and Students with authorised access must maintain the PC facility in a clean state by following good housekeeping.

- Using dedicated cleaning equipment for physical containment spaces only.
- Cleaning and decontaminating work benches at least daily and after every experiment involving microorganisms with an appropriate disinfectant.
- Keeping bench areas tidy.
- Cleaning and decontaminating equipment with an appropriate disinfectant.
- Maintaining clear walkways.
- Cleaning up spills.
- Ensuring cleaning of high touch points (such as door handles, fridges, autoclaves telephones, keyboards, reading and writing materials) is conducted at least fortnightly. A local roster and records should be maintained to demonstrate completion.
- Utilising disposable lab ware where possible. If reusable labware is used or potentially contaminated it must either be autoclaved or soaked in an appropriate disinfectant before washing.
- Placing biohazardous and clinical waste into the approved bins with regular disposal by an authorised waste contractor.
- Placing contaminated broken glassware directly into a puncture resistant container for biohazard disposal.

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- Placing collapsed cardboard boxes in the designated disposal or collection location.

3.6.2 Equipment Decontamination and Maintenance

The following decontamination rules apply for equipment:

- When maintenance activities are required for equipment that has been used for biosafety relevant activities, the equipment is to be appropriately cleaned and disinfected.
- When equipment that has been used for biosafety relevant activities is to be removed from a laboratory (e.g. maintenance, servicing, or relocation), the equipment is to be appropriately cleaned and disinfected. The Appointed Facility Officer must request a decontamination certificate from the Health and Safety Parter (Biosafety and Regulated Substances) and attach to the equipment. Any laboratory specific stickers such as 'quarantine' are to be removed from equipment.
- When significant maintenance and renovation activities for a physical containment facility occur; activities in the facility (or portion of) are to be suspended for that period of time and the facility decontaminated. The facility must be inspected by the Health and Safety Parter (Biosafety and Regulated Substances) to ensure the intended physical containment standard has been reinstated prior to recommencement of biological activities.

Regulated Physical Containment spaces may have additional requirements that apply.

3.7 Biological Material Storage and Inventory

Employees are required to keep accurate inventories and records of biological materials stored within PC facilities to comply with regulatory requirements and align with the Australian Code for the Responsible Conduct of Research.

4 References

Nil.

5 Schedule Information

Accountable Officer	Chief People Officer
Responsible Officer	Director (Health, Safety and Wellbeing)
Policy Type	University Procedure

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Policy Suite	Work Health and Safety Policy
Approved Date	19/8/2026
Effective Date	19/8/2026
Review Date	19/8/2031
Relevant Legislation	*Work Health and Safety Act 2011* (Qld) *Work Health and Safety Regulation 2011* (Qld)
Policy Exceptions	Policy Exceptions Register
Related Policies	
Related Procedures	Biosafety Procedure Research Data and Primary Materials Management Procedure Work Health and Safety Risk Management Procedure
Related forms, publications and websites	AS2243.3 Safety in Laboratories - Microbiological Safety and Containment Safety Central Decontamination Certificate Application Form
Definitions	**Terms defined in the Definitions Dictionary**
	Employee A person employed by the University and whose conditions of employment are covered by the Enterprise Agreement and includes persons employed on a continuing, fixed term or casual basis. Employees also include senior Employees whose conditions of employment are covered by a written agreement or contract with the University. Information Any collection of data that is processed, analysed, interpreted, organised, classified or communicated in order to serve a useful purpose, present facts or represent knowledge in any medium or form. This includes presentation in electronic (digital), print, audio, video, image, graphical, cartographic, physical sample, textual or numerical form. Inventory

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Assets that are either held for sale in the ordinary course of business, in the process of production for such sale or in the form of materials or supplies consumed in the production process or in the rendering of services.

Notice

A Notice from the University is a document, whether physical or electronic. A Notice may be: given by hand to the addressee or delivered to the address provided by the addressee to the University; or sent by registered or pre-paid mail to the address provided by the addressee to the University; or sent by electronic communication to the University-issued email account provided by the University to a Student during the period of Enrolment until the completion of their program; or sent by electronic communication to the email address provided to the University by an addressee not enrolled at the University. A Notice is taken to be received if: given by hand to the addressee or delivered to the address provided to the University by the addressee; or sent by registered or pre-paid mail - three University Business Days after the date of posting; or sent by electronic communication - at the time that would be the time of receipt under the Electronic Transactions Act 1999 or its succeeding legislation. A Notice that would be deemed to have been received out of business hours or on a non-University Business Day will instead be deemed received on the next University Business Day.

Primary Materials

Physical objects acquired through a process of scholarly investigation from which Research Data may be derived. Includes, but is not limited to, ore, biological material, survey questionnaires, measurements, recordings, artefacts, texts, photographs, and computer results. In some instances, Primary materials may be considered research data, and may be required to be retained to validate the outcomes of research.

Research

Research is the creation of new knowledge and/or the use of existing knowledge in a new and creative way to generate new concepts, methodologies, inventions and understandings. This could include the synthesis and analysis of previous research to the extent that it is new and creative.

Research Activities

Refers to activities that result in the creation of new knowledge and/or the use of existing knowledge in a new and creative way so as to

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generate new concepts, methodologies and understandings. This could include synthesis and analysis of previous research to the extent that it leads to new and creative outcomes.

Research Data

Researchers have a responsibility to retain clear, accurate, secure and complete records of research data. It is critical that data includes records necessary for the reconstruction and evaluation of reported results and processes leading to those results. Research data relates to facts, observations, measurements or experiences on which an argument, theory or test is based. Research Data may be numerical, descriptive, visual or tactile. It may be raw, or analysed, experimental or observational and may be held in any format or media. Examples include, but are not limited to: Laboratory notebooks; Field notebooks; Primary Research Data; Questionnaires; Audio and video recordings; Photographs; Films; Test responses, and Any other records that are necessary for the reconstruction and evaluation of the reported results of research. Research Collections may include slides, specimens, samples and artefacts; with related provenance information. Research data (and primary materials) includes evidence supporting findings. For example, in the Creative Arts this may include early drafts and concept documents prior to the final output of the creative work.

Researcher

Any person/s involved in Research Activities at, or on behalf of the University. This includes, but is not limited to Employees, Students, visiting scholars, research partners, research affiliates, holders of Honorary or Adjunct positions.

SafeZone

A personal safety mobile application, allowing registered users a quick and easy means of raising an alert for assistance.

Student

A person who is enrolled in a UniSQ Upskill Course or who is admitted to an Award Program or Non-Award Program offered by the University and is: currently enrolled in one or more Courses or study units; or not currently enrolled but is on an approved Leave of Absence or whose admission has not been cancelled.

University

The term 'University' or 'UniSQ' means the University of Southern Queensland.

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	Definitions that relate to this schedule only
Keywords	Biological, PPE, biosafety, RG1, RG2, gloves, hygiene, decontamination, cleaning
Record No	21/175PL

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