



## Paper copies of this document might not be the most up to date version.

The definitive version of all University of Leicester (UoL) Human Tissue Authority (HTA) Standard Operating Procedures (SOPs) appear online, not in printed form, to ensure that the up to date versions are used. If you are reading this in printed form check that the version number and date below is the most recent one as shown on the Research Governance Ethics and Integrity (REGI) Website.

SOP: HTA-A1023-UoL



Version Number: 1.0

Effective Date: January 2021

Supersedes: HTA-1011-UoL

Last Review Date: Jul 2020    Next Review Date: Jan 2023

### Development and Approval Record for this Document

Role	Name	Job title	Signature	Date
Author	Amanda Sutcliffe	HTA Monitoring Officer		08/02/2021
Reviewer	All members of the College of Life Sciences Human Tissue Governance Committee	College of Life Sciences Human Tissue Governance Committee	N/A	N/A
Authoriser	Professor Peter Bradding	Designated Individual		08/02/2021

SOP identifiers	SOP details
ID number	HTA-A1023-UoL
Title	Emergency Planning
Version	1.0
Page Number	Page <b>2</b> of <b>4</b>

## Background

This document has been produced in accordance with The Human Tissue Act 2004. It should be read in conjunction with the University's 'Policy on Compliance with the Human Tissue Act in Research', HTA Standards and the HTA Codes of Practice. The Human Tissue Act must be followed by all researchers working under the University's Research Licence and those transferring HTA relevant material as part of an ethically approved research project.

## Purpose and Scope

This SOP describes the process that should be followed in the event of an emergency relating to human tissue samples held under the UoL HTA Research Licence in the following circumstances (Note: this list is not exhaustive):

- loss of power to building or laboratory
- freezer breakdown
- catastrophic damage to building or laboratory due to e.g. flood, fire, smoke etc.
- lack of staff

This SOP applies to all individuals working under the University's Research Licence, REGI staff and members of the Human Tissue Governance Committee (HTGC).

### Definitions:

DI	Designated Individual
HTA	Human Tissue Authority
HTGC	Human Tissue Governance Committee
PD	Persons Designated
REGI	Research Governance Ethics and Integrity
SOP	Standard Operating Procedure
UoL	University of Leicester

SOP identifiers	SOP details
ID number	HTA-A1023-UoL
Title	Emergency Planning
Version	1.0
Page Number	Page 3 of 4

## Roles and Responsibilities

It is the responsibility of the Designated Individual (DI) to ensure that suitable practices take place within the licensed establishment that comply with the HTA codes of practice

The HTA Monitoring Officer is responsible for ensuring this SOP remains fit for purpose taking into consideration any changes in legislation and/or Codes of Practice.

It's the responsibility of the Persons Designated (PD) to assist the DI in implementing and adhering to the governance processes and to ensure there is an up to date contingency plan in place for their area of oversight.

## Procedure to follow

All areas should have a local contingency plan documented and filed within their PD Master File; (*Contingency Plan SOP HTA-A1023 Appendix 1*).

When putting together the contingency plan, the following factors should be taken into consideration:

- Amount of time that an incident will effect an area- i.e. short, medium or long term. (E.g. amount of time power will be cut from a building or laboratory, whether a freezer breakdown can be repaired immediately, within a couple of hours or whether permanent breakdown has occurred etc).
- Freezers should be labelled so that in the event of an emergency, staff are able to identify which freezer has priority to be saved above others.
- Whether there is back up storage within the same department or in another department.
- Whether there is back up storage available externally.
- Whether staff from other departments can be seconded into the affected area.

In the event of an incident requiring initiation of the contingency plan, the DI and REGI Office must be informed. An Adverse event/Incident form must be completed to document the event and subsequent action taken.

Meetings with the DI, local staff and REGI Office should take place as required.

Following resolution of the incident the local contingency plan should be updated where necessary.

Local contingency plans should be reviewed on an annual basis.



SOP identifiers	SOP details
ID number	HTA-A1023-UoL
Title	Emergency Planning
Version	1.0
Page Number	Page 4 of 4

This table is used to track the development and approval of the document and any changes made on revised / reviewed versions

### Review Record

Date	Issue Number	Reviewed By	Description Of Changes (If Any)

### Distribution Record:

Date	Name	Department	Received Y/N