



British Occupational
Hygiene Society

The Chartered Society for
Worker Health Protection

Using The Group Authority Licence (GAL)

By Graham Newport (GAL Responsible Officer)

What this presentation covers

- The background behind why the Group Authority Licence (GAL) is needed.
- An overview of what is required of Members.
- Changes to the associated SOP, including those introduced to reduce the administrative burden so far as possible.

Why is the Group Authority License (GAL) needed?

- HSE Recommend the use of MDHS 25/4 for measuring airborne isocyanates.
- MDHS 25/4 requires the use of 1-(2-methoxyphenyl)piperazine [1-2MP].
- 1-2MP is a controlled drug.

Why is the GAL needed?

- Like all controlled drugs, the supply and use of 1-2MP is strictly controlled.
- Those supplying and using 1-2MP can only do so under a Home Office Licence.
- It is essential that the conditions of the Licence are complied with.
- Failure to comply with these conditions can result in the Licence being revoked.

Why is the GAL important to the FOH?

- Members of the Faculty of Occupational Hygiene (FOH) can operate under the GAL.
- This puts Members in the privileged position of being able to work to MDHS 25/4.

Which grades of Membership can work under the GAL?

- Chartered Fellow
- Chartered Member
- Licentiate
- Associate

Which grades of Membership can work under the GAL?

- Ordinary Members and others can assist in surveys, for example trainees or technicians, but they must work under close supervision of Members and understand the requirements of the SOP.

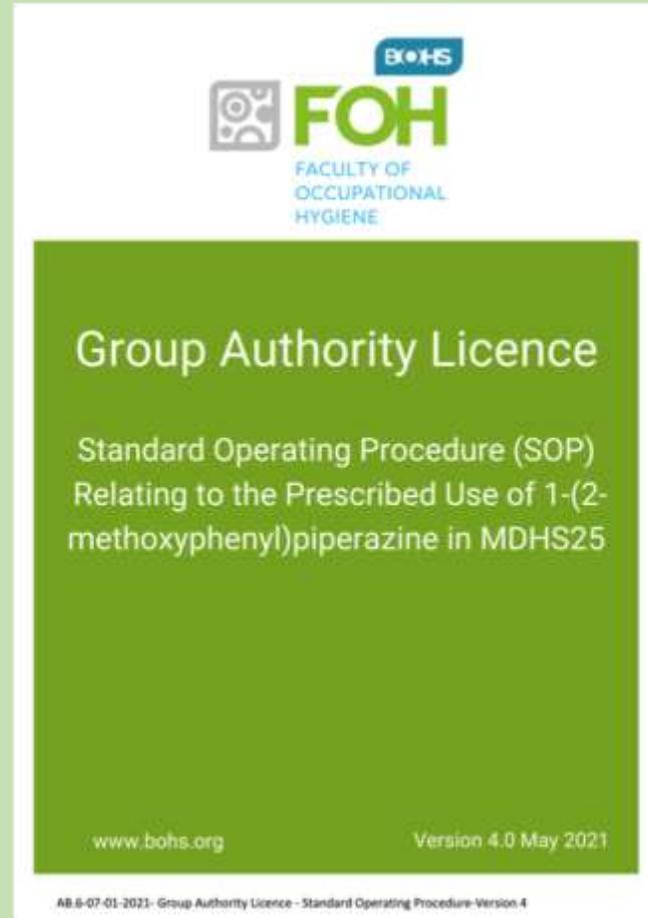
A key benefit to FOH members

- To ensure the continuity of this benefit for Members, the Licence conditions must be complied with.
- If Members are unable to use MDHS 25/4 this would result in fewer surveys being carried out to the current standards and workers' health would be compromised.

The Standard Operating Procedure

- The Standard Operating Procedure (SOP) has been produced to assist in retention of the GAL by ensuring a controlled chain of custody from receipt until return to the laboratory.
- The key Home Office Licence conditions have been embodied into the SOP.
- Strict compliance with the SOP will therefore ensure GAL benefits continuity.

The SOP v4



The Standard Operating Procedure

- The SOP does NOT ensure the generation of valid isocyanate data. This is the job of MDHS 25/4 and Members must follow this.
- The SOP focusses on the Home Office Licence conditions, and in particular the need for a rigorous “chain of custody” of 1-2MP between receipt from, and return to, an approved laboratory.

The GAL Audit

- The Audit is an essential requirement of the GAL.
- The Home Office requires strict adherence and audit responses will be scrutinised in detail.

The GAL Audit Team

- Claire Creed
- Val Pollard
- The Faculty of Occupational Hygiene Committee
- Graham Newport

The GAL Audit

- Please take care to provide accurate, honest responses.
- Ensure all required sections are completed.
- All members are expected to comply with the FOH Code of Ethics, and the requirements of the Continuing Professional Development (CPD) scheme.

The GAL Audit Timetable

- 1st December – Deadline for Members to declare usage through the BOHS portal
- 5th December – Email to Members selected for Audit
- 10th January – Deadline for submission of Audit information

Condition of Use of the GAL

- It is a Condition of Use that Members are deemed to have consented to grant permission for the issuing laboratories to supply BOHS with data that they hold on Members in respect of 1,2-MP received and returned.
- These data will be used to verify information submitted by Members on Audit returns.
- Discrepancies will be investigated.

Area of applicability

- The GAL only allows Members to carry out work to MDHS 25/4 within Great Britain (England, Scotland and Wales).

Forms to be submitted for auditing

- Local Standard Operating Procedure
- Individual Work Record Sheet(s), with Exception Record(s) if applicable
- Audit of Records Cover Sheet

Local Standard Operating Procedure

- Summarises how the chain of custody is maintained within the Member Company.
- Usually only one Local SOP is required from each Member Company.

Local Standard Operating Procedure

Local Standard Operating Procedure Relating to the Prescribed Use of 1-(2-methoxyphenyl)piperazine in MDHS25		
1. Company Details		
a. Company Name:		
b. Company Reference:		
2. Procedure Management		
a. Date of Procedure:		b. Review Date:
c. Name and Role of Person Responsible for the Procedure:		
3. Members Covered by the Procedure		
Name	Grade	Membership No.
4. Laboratories Used by the Company <i>Ref. SOP paras 4.1, 4.2</i>		
Name	Address	Contact Details
5. Describe How the Sampling Media are:		
a. ordered <i>(Ref. SOP paras 4.1 – 4.4)</i>		
b. delivered and received <i>(Ref. SOP paras 5.1 – 5.2)</i>		
c. taken to site <i>(Ref. SOP para 6.1)</i>		
d. stored <i>(Ref. SOP para 8.1)</i>		
e. returned to the lab. <i>(Ref. SOP para 9.1)</i>		
6. Courier Used to Deliver and Collect Sampling Media		
a. The laboratory delivers and collects the sampling media:	Yes <input type="checkbox"/>	No <input type="checkbox"/> please complete 6b.
b. Name of Courier	Address of Courier	

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Authorised laboratories

- Health and Safety Laboratory (HSL)
- RPS Laboratories
- Institute of Occupational Medicine (IOM)

Individual Work Record Sheet(s)

- An Individual Work Record Sheet is required for EACH AND EVERY survey using 1-2MP.

Individual Work Record Sheet(s)

Individual Work Record Sheet Relating to the Prescribed Use of 1-(2-methoxyphenyl)piperazine in MDHS25			
1. Company Carrying Out the Survey			
a. Company Name:		b. Record Sheet No:	
2. Job Details			
a. Company Unique Job Ref:		b. Date of Survey:	
c. Location of Survey: <i>Include site contact details</i>			
d. Nature of the Survey:			
3. Survey Team			
a. Name of Member Leading the Survey:			
b. Other People on the Team: <i>Include name and role of anyone assisting with the survey and confirm they have been trained in this SOP.</i>			
4. Pre-Survey			
a. Name of Lab:			
b. No. Filters Ordered:		c. Vol. Solution Ordered: <i>Include any stabilising solution</i>	
d. Date of Order:		e. Date Order Received:	
f. Name of Courier:			
5. Post Survey			
a. No. Filters Used:		b. Vol. Solution Used: <i>Include loss by evaporation</i>	
c. No Filters Unused		d. Vol. Solution Unused:	
e. Date Returned to Lab: <i>Include used and unused</i>		f. Lab. Job Reference:	
g. Name of Courier:		h. Tracking Reference:	
6. Any Further Information Relevant to the Job			

Tracking numbers

- It is important to include tracking numbers on Individual Work Record Sheets when returning samples to the laboratory.
- The requirement to include tracking numbers when receiving sampling media has been removed from the Individual Work Record Sheets.

Exception records are required:

- An unlisted laboratory was used.
- If there is a discrepancy between the amount of 1-2MP ordered and that returned to the laboratory.
- Unused sampling media must be returned to the issuing laboratory. An Exception Record is no longer required when returning unused sampling media to the laboratory for destruction when returned with exposed samples requiring analysis. However, an Exception Record would be required if an entire batch of unused sampling media was returned.

Actions to take in the event of theft:

- Report to the police.
- Report to the BOHS Responsible Officer and provide a written report.

Exception records:

7. Exception Records			
If there were exceptional circumstances on this job please tick the box and provide details on the next page:			
a.	There was a discrepancy between the amount of sampling media ordered and returned to the lab (Ref. SOP paras 5.2, 9.1, 10.1, 11.1, 11.2):	<input type="checkbox"/>	
b.	An entire consignment of sampling media was returned to the lab. for destruction (Ref. SOP para 12.4):	<input type="checkbox"/>	
c.	An unlisted lab. was used (Ref. SOP para 4.1, 4.2):	<input type="checkbox"/>	
Exception Record			
8. Discrepancy Between the Amount of Sampling Media Ordered and Returned to the Laboratory			
a. Discrepancy Between the Amount of Sampling Media Ordered and Received (Ref. SOP para 5.2)			
Please tick the box if the discrepancy was caused by:			
	<ul style="list-style-type: none"> theft or loss of the sampling media (Ref. SOP para 10.1): 	<input type="checkbox"/>	
Please provide more information about the discrepancy, including any remedial action that has been taken:			
b. Discrepancy Between the Amount of Sampling Media Received and Returned (Ref. SOP paras 9.1, 10.1, 11.1, 11.2)			
Please tick the box if the discrepancy was caused by:			
	<ul style="list-style-type: none"> theft or loss of the sampling media (Ref. SOP para 10.1): QC/QA procedures (Ref. SOP 11.1, 11.2): 	<input type="checkbox"/>	<input type="checkbox"/>
Please provide more information about the discrepancy, including any remedial action that has been taken:			
9. Sampling Media Was Returned to the Laboratory for Destruction (Ref. SOP para 12.4)			
Please provide more information including the reason why the whole consignment of the sampling media was returned, e.g., because it was damaged, the shelf-life has been exceeded or because of a sampling failure:			
10. An Unlisted Laboratory Was Used (Ref. SOP paras 4.1, 4.2)			
Please provide the following details about the laboratory and attach written confirmation from the laboratory that they hold a Home Office licence to possess and supply the sampling media:			
Name	Address	Contact Details	Licence No.

Audit of Records Cover Sheet

- An Audit of Record Cover Sheet that lists all of the Records returned for auditing.

Audit of Records Cover Sheet

Prescribed Use of 1-2MP in MDHS 25	
Audit of Records Cover Sheet	
Annual Audit	1 January 2021 to 31 December 2021
Name:	
Membership no:	
Instructions for completion: Please complete Section 1 by ticking the relevant boxes. Section 2 must be completed only if there have been exceptional circumstances.	
SECTION 1 – ROUTINE RECORDS	
I enclose the following records:	
a) Local Standard Operating Procedure	<input type="checkbox"/>
b) Individual Work Record Sheet for each job	<input type="checkbox"/>
SECTION 2 – EXCEPTION RECORDS	
I enclose the following records:	
a) Records of any discrepancies between the amount of sampling media ordered and returned to the lab (Ref. SOP paras 5.2, 9.1, 10.1, 11.1, 11.2)	<input type="checkbox"/>
b) Records of whole consignments of sampling media returned to the laboratory to be destroyed. (Ref. SOP para 12.4)	<input type="checkbox"/>
c) If you have used a laboratory other than HSL, RPS Laboratories Ltd or IOM Consulting Ltd:- Written confirmation from the laboratory that they hold a Home Office licence to possess and supply Schedule 1 drugs. (Ref. SOP para 4.1, 4.2)	<input type="checkbox"/>
d) Any other incidents. (please specify)	<input type="checkbox"/>

Retention of records

- All records must be retained for 5 years past the entry date.

Audit Non-Conformance Record

- If the Audit identifies a Non-Conformance you will receive the following record.

Audit Non-Conformance Record

Group Authority Licence Standard Operating Procedure (SOP) Audit Non-conformance Record				
1. Company Carrying Out the Survey				
a.	Company Name:		b.	Responsible Person
2. Job Details				
a.	Company Unique Job Ref:		b.	Date of Survey:
c.	Location of Survey: <i>Include site contact details</i>			
d.	Nature of the Survey:			
3. SOP Non-conformance(s)				
Clause	Requirement	Non-conformance		
4. Action required				
Please respond in writing to the above non-conformances within 10 working days of receipt of this Notice. Responses should be sent by email to GAL@bohs.org .				
The response should include the reasons for the non-conformance and, as appropriate, any remedial actions taken in the short-term and in the longer term to prevent re-occurrence.				

The future

- Audits show that most issues arise because of lack of understanding of the requirements of the SOP.
- From 1st January 2022 all those working under the GAL will be required to pass the GAL Assessment .
- This GAL Assessment would be obtained by correctly answering 14 multiple-choice questions on the SOP. It is anticipated that this will take no more than 10 minutes.
- The GAL Assessment is expected to be available to take online from November in readiness for 2022.

Any questions or queries?

- Contact the GAL Responsible Officer by email to GAL@bohs.org