

Biological Risk Management and Containment

**Commissioning and
Decommissioning
Laboratories in
Containment and
Transitional Facilities**

Repair and Maintenance

Containment Laboratory Guidelines

Version 2.1- November 2024

This document was updated from Version 2 which was reviewed and approved in February 2021.

Record of Amendments to Version 2.1

Date	Page number	Nature of amendment
30/11/24	all	University logo uploaded

Contents

1. Who is this reference document for? 4

2. What is the purpose of this document? 4

3. Commissioning of newly built laboratories in containment and transitional facilities 4

4. Commissioning of renovated laboratories in containment and transitional facilities 5

5. Decommissioning of laboratories in containment and transitional facilities 6

6. Documentation 6

7. Definitions 7

8. Appendix 1: Internal audit checklist – PC1 laboratories 8

9. Appendix 2: Decontamination checklist 10

10. Appendix 3 – Record of repair/renovation 11

1. Who is this reference document for?

This document is primarily intended for **designated persons in charge** but is also useful for **principal investigators (PIs), designated laboratory person (DLPs)**, technical staff and students who access laboratories within University of Auckland containment and transitional facilities. This information is also intended to help departmental, school, faculty and Property Services managers and administrators to make decisions related to commissioning or decommissioning laboratories within University of Auckland containment and transitional facilities.

2. What is the purpose of this document?

All laboratories and specialised containment/transitional facilities for animals and plants must at all times meet the minimum standards for PC1 or PC2 as outlined in AS/NZS 2243.3:2002.

The requirements of the University and MPI related to signage and security must also be met prior to commissioning and recommissioning the laboratories for use.

When these laboratories are decommissioned for repair or renovation, a documented process is to be followed to ensure adequate decontamination.

Therefore, the overall purpose of this document is to ensure a proper handover process.

3. Commissioning of newly built laboratories in containment and transitional facilities

This commissioning process is in addition to processes undertaken by Property Services and is to be undertaken only after approval from MPI has been obtained, and Property Services has formally handed the newly built laboratory over to the occupants. It is implicit in this document that Property Services has built the new laboratory to the required standard.

Commissioning checks are to take place once all laboratory equipment, laboratory coats and medical waste bins are in place.

The designated person in charge assigned to check the laboratory is to verify that work practices are appropriate as required by AS/NZS 2243.3:2002 and the University of Auckland. (See the checklist in Appendix 1.)

Laboratory work may begin only when all requirements are met. The designated person in charge must contact the Hazard and Containment Manager to inspect the facility after completion and to give an internal approval. When satisfied, the Hazard and Containment Manager will notify MPI and arrange an inspection. Upon MPI approval, the Hazard and Containment Manager will then ensure the containment laboratory is included in the list of rooms within the facility.

4. Commissioning of renovated laboratories in containment and transitional facilities

This commissioning process applies to existing laboratories that have undergone renovation or significant repair. Significant repairs are defined as those repairs that entail clearing of laboratory space to enable repair or renovation to be completed. Note that for significant repairs, MPI approval is required.

Examples of significant repairs might be removal of a wall panel, repair of a significant area of flooring, removal of more than three ceiling tiles, or isolation and repair of a section of the laboratory. Note also that in the event of facility cooling failure, where windows might need to be opened, the containment boundary will be effectively breached, requiring prior MPI approval.

In some cases, the laboratory may have to be closed and surfaces decontaminated to allow work to proceed. In such cases the laboratory is to be formally handed over to contractors.

All liaison with MPI is to be conducted by the Hazard and Containment Manager or the designated person(s) in charge. The latest has to ensure the contractors are properly inducted for work within a containment laboratory.

When the laboratory repairs are completed, the designated person in charge is to verify that the physical structure and fabric of the renovated laboratory meets the requirements of PC1 or PC2 as stated in AS/NZS 2243.3:2002, using the checklist in

Appendix 1. Providing the laboratory repairs have been completed and meet the required standard, the laboratory can formally be handed back to the facility.

The designated person in charge can then arrange for equipment, laboratory coats and medical waste bins to be put in place.

The designated person in charge is to verify that all work practices meet requirements as per Appendix 1.

In case of significant repairs, when works are completed the designated person in charge must update the repair register and following verifier instructions on the notification. The verifier discretion of the verifier, they can demand that we record completion internally and then send periodic repair reports, rather than notify of completion every time. In any case, repairs records must be kept by the facility.

5. Decommissioning of laboratories in containment and transitional facilities

Before decommissioning a containment laboratory, the designated person in charge is to notify MPI and a decommissioning/decontamination protocol be agreed upon.

The designated person in charge is then to verify that equipment and bench surfaces have been adequately decontaminated, using approved decontamination agents as per Appendix 2, before equipment and fittings are removed from the laboratory.

In some cases, this will also involve fumigation of ducting and HEPA filters.

When the laboratory has been decommissioned, the designated person in charge is to ensure the containment laboratory is removed from the list of rooms within the facility.

6. Documentation

Repairs and renovation are to be documented on the form in Appendix 3.

7. Definitions

Designated laboratory person (DLP) means the trained person in each research group who has been given the authority to receive purchase requests made in SciTrack and to make a formal request for a purchase order via PeopleSoft. In containment and transitional facilities DLPs will have additional training to enable them to scrutinise documentation for restricted items and provide support to researchers.

Designated person in charge means a staff member in any of the following roles: sector manager, facility manager, floor manager, technical manager or an appointed delegate.

Principal Investigator (PI): In the context of hazard containment and transitional facilities, a principal investigator is the holder of an independent grant administered by the University and the lead researcher for the grant project, usually in the sciences, such as a laboratory study or a clinical trial. The phrase is also often used as a synonym for "head of the laboratory" or "research group leader." The PI is responsible for assuring compliance with applicable University standards and procedures, and for the oversight of the research study and the informed consent process. Although the PI may delegate tasks, they retain responsibility for the conduct of the study.

8. Appendix 1: Internal audit checklist – PC1 laboratories

Room number:

Laboratory facilities

- Surfaces impervious
(check floors, vinyl junctions, benchtops)
- Washbasins/soap/towels installed
- Under-bench areas clear
- Chair fabric impervious

Work practices

- Laboratory coats in use
- Writing material separated from experimental area
- Evidence of bench disinfection
- No long-term storage of cultures on bench
- Bench areas tidy
- Waste not accumulating
- Approved decontamination agents present and labelled with expiry date
- Autoclave run with BI test, test passed and documented

MPI containment requirements

a. Biohazard symbol present on door

b. Ancillary documentation

Class II Hood certification and expiry date

Fume Hoods tested

Audit performed by:

Date:

Items needing correction:

Follow up audit (where necessary)

To check items:

9. Appendix 2: Decontamination checklist

Room number:

Inside incubator, with approved decontamination agent

Inside BSC (including sump), with approved decontamination agent

Waste bin, with approved decontamination agent

Lab coats autoclaved

Outer surfaces of *all* equipment sanitised with 70% ethanol

Once cleared, all bench surfaces decontaminated with approved agent

Approved decontamination agents used:

Signed:

Date:

10. Appendix 3 – Record of repair/renovation

Room:	Building:
Containment Facility:	
Nature of repair/renovation	(Photograph if required)
Proposed date of commencement:	Proposed Date of Completion
Approval of designated person(s) in charge:	Date MPI approval
Date handover:	
Date completion:	(Photograph if appropriate)
Date hand-back:	
Technical manager approval that repairs and renovations meet required standard:	
Date MPI notified of completion	