

Health, Safety and Environment Committee



Loughborough
University

Minutes SAF16-M3

Minutes of the Health, Safety and Environment Committee held on Wednesday 28 September 2016

Attendance

Members:

Rob Allan, Spencer Aryeetey, Mark Biggs, Neil Budworth, Andrew Burgess, Tom Carslake, Suzanne Dexter (ab), Sandy Edwards, Alec Edworthy, Geoff Feavyour (ab), David Fulford, Marc Gibson (ab), Andy Gomez (ab), Tony Goodall, Ann Greenwood, Rod Harrison, Irvin Hendrickson (ab), Jude Hoy (ab), Nik Hunt, Rob Hunter (ab), Rachael Jermyn, Allan Jones, Alice Kirkaldy, Mark Lewis, Chris Linton (Chair), Hershil Patel, Harshad Purohit, Brian Reed, Richard Taylor, Bob Temple, Christian Tileaga, Julie Turner, Hugh Weaver

In attendance:

Manuel Alonso (in place of Chair of the Wardens Sub Group and for item 16/55), Martine Ashby (Secretary), Kay England (in place of Director of Campus Living), Fehmidah Munir (for item 16/45)

Apologies received from:

Geoff Feavyour, Marc Gibson, Jude Hoy, Rob Hunter

16/39 Minutes

SAF16-M2

The minutes of the previous meeting held on 8 June 2016 were CONFIRMED.

16/40 Matters arising from the Minutes

SAF16-P41

Actions arising from previous minutes were NOTED and their current status confirmed.

16/41 Constitution, Terms of Reference and Membership for 2016/17

SAF16-P42

41.1 The Committee's constitution, terms of reference and membership for 2016/17 were NOTED.

41.2 The Committee APPROVED a proposal by the Health, Safety and Risk Manager (HSR Manager) to establish a working group of five to six people to review the constitution, terms of reference and membership of the Committee. The working group would consult with the unions. It would be

chaired by the HSR Manager and would report back to the Committee at its next meeting in February 2017. **ACTION: HSR Manager**

16/42 Report from the Health, Safety and Risk Manager

SAF16-P43

42.1 The Committee RECEIVED a report from the HSR Manager.

42.2 The following points were NOTED in particular:

- (i) A recent high-profile health and safety court case involving Alton Towers had revealed how the courts were interpreting the new sentencing guidance. The case highlighted the importance, amongst other things, of staff training, maintenance of equipment, access to equipment manuals and the attitude of managers. In particular the court had noted the pressures that were placed upon employees and the incentives used to maximise the time the rides in question were running.
- (ii) Arising from 16/M18.4 *Matters Arising*, work was continuing on the development of a policy on Unmanned Aircraft Systems (Drones) with a view to a policy and guidance being made available for consideration at the February 2017 meeting. **ACTION: Deputy HSR Manager**
- (iii) Arising from 16/M21 *Development of Health and Safety Risk Registers*, a full project plan had been developed and dates identified for the production of risk registers in all Schools and Professional Services with significant risks. Sessions had been conducted for imago, Student Services and the School of Arts, English and Drama, and they were to be guided through the process of producing their own action plans. This information would be used to produce an overall University health and safety risk register and coordinated audit plan.
- (iv) Opportunities were being sought to work with academic colleagues on site to develop best practice and to strengthen the evidence base of Health and Safety Management. A significant piece of research was being undertaken with staff in the Department of Social Sciences to examine safety conversations with the aim of identifying ways of making them more effective. Practical training based on the research would be delivered in October and the research findings presented at the February 2017 meeting. **ACTION: HSR Manager**
- (v) Visual Communications students had been asked to develop an approach to improve bicycle safety on site, and discussions were being held with the Design School to identify strategies to improve road safety on campus.
- (vi) A wellbeing programme developed by staff in the School of Sport, Exercise and Health Sciences, 'Walking Works Wonders', had been implemented by the Corporate Services team.
- (vii) Incident reduction programmes were being implemented following analysis of incident data, and existing incident reporting processes were being examined with the aim of optimising the processes and automating them.
- (viii) A safety alert process had been developed and implemented so that lessons could be learnt from incidents on campus and beyond.

16/43 Overview of the Draft Health and Safety Strategic Framework

SAF16-P44

43.1 The Committee RECEIVED an overview of the draft strategic framework. The framework directly linked the activity of the Health and Safety Service to the strategic aims of the University and would form the basis of the health and safety annual plan for 2016/17.

43.2 The Committee NOTED the efforts made to inform students of health and safety issues that could affect them and to motivate them to take appropriate precautions. These were very evident at induction through, for example, fire exercises and pre-registration inductions. The Service was also using alternative methods of engaging with students throughout their time at the University, for example through social media, to continue to reinforce health and safety messages. The Service anticipated that the communication research which it had commissioned would help it to improve this communication with existing students.

- 43.3 The Committee NOTED that when used operationally an additional column was to be added to the Framework document to record what actions needed to be completed, by when and by whom.
- 43.4 The Committee APPROVED the vision and strategic principles contained within the Framework and NOTED that the work plan was appropriate.

16/44 Environmental Manager's Report

SAF16-P45

- 44.1 The Committee RECEIVED an update on environmental management activities from the Environmental Manager.
- 44.2 The following points were NOTED in particular:
- (i) The majority of development plan targets had been met. Those that had not, had been rolled into new targets in the new development plan.
 - (ii) An external audit of the ISO 14001 Environmental Management System had been carried out in July. The outcome of the audit had been very positive. The auditors had indicated that the University had demonstrated that it continued to operate an effective system which was exposed to continual improvement and had recommended continued registration to ISO 14001: 2004. The system needed to be reviewed to incorporate Loughborough University London within its scope. **ACTION: Environmental Manager**
 - (iii) The report included details of four environmental incidents during the reporting period. One of these had been potentially significant but had been judged by the local Environment Agency Officer not to be reportable as a pollution incident.
 - (iv) There had been no significant change in waste levels excluding construction waste compared with the previous year. It was noted that it was difficult to achieve a reduction in waste because targets could easily be missed as a result of one-off events such as the decommissioning of a laboratory. It was suggested that in future these one-off events could be presented separately in the waste report so that they did not skew the statistics. The Environmental Manager would investigate whether this would be possible. **ACTION: Environmental Manager**
 - (v) The existing Waste Strategy was being reviewed, together with progress against it, making use of more reliable data than had been available in the past. The new strategy would place greater emphasis on a number of areas including a reduction in food waste, an increase in campus recycling and engagement with students to increase recycling in halls.
 - (vi) An Emergency Spill Response Exercise had been carried out in the S Building to fulfill a requirement of the Environmental Management System. The exercise had been well attended and well received. It had achieved its aims of testing the University's procedures and in doing so had confirmed that the procedures were appropriate. A review of the outcomes from the identified actions arising from the exercise would take place early in 2017.
- 44.3 It was AGREED to approve the University Environmental Policy once again and recommend it to the Vice-Chancellor for signing dated October 2016 following some minor corrections ('continuous' changed to 'continual' and 'certain' to be removed from 'share *certain* responsibilities') and incorporation of references to Loughborough University London. **ACTION: Environmental Manager.**

16/45 Health and Wellbeing of the Working Age Population

SAF16-P46

- 45.1 The Committee RECEIVED a presentation by the Dean of the School of Sport, Exercise and Health Sciences on the University's role in the health and wellbeing of the working age population. The presentation outlined the School's research experience and expertise in this area and provided details of a number of relevant areas of research which its staff had been involved with. It was AGREED that weblinks to the guidance that had been generated from the research findings should be made available to members. **ACTION: Secretary**

- 45.2 The Committee AGREED in principle to the development of a proposal for a wellbeing offering for University staff making use of the outcomes of this research. Human Resources and the School of Sport, Exercise and Health Sciences would develop principles for the introduction of the offering for consideration at the February meeting. **ACTION: Director of HR, Dean of SSEHS**
- 45.3 Members were invited to contact the School's Technical Resources Manager should they wish to seek further information about the School's treadmill desks and other similar equipment. **ACTION: Members**

16/46 Radiation Protection Officer's Report

SAF16-P47

- 46.1 The Committee RECEIVED an update on radiation protection from the Radiation Protection and Biological and Chemical Safety Officer (RPBCS Officer).
- 46.2 The following points were NOTED:
- (i) The Office for Nuclear Regulation (ONR) had carried out a largely positive unscheduled visit to the University. The representative intended to meet with senior management to explain issues relating to the reporting of nuclear declarations for research projects.
 - (ii) The RPBCS Officer was working closely with ONR regarding the ONR transport non-compliance earlier in the year and was on track to complete requested action by ONR's deadline of the end of the year.
 - (iii) An internal inspection had been carried out on all permitted radiation area as specified by the Environment Agency and had discovered no compliance issues. The full report of the inspection had been approved by the Radiological Protection Sub-Committee.
 - (iv) A full audit had been carried out of items in the radiochemistry lab, and plans were being made for the disposal of various items which had circumvented current procurement procedures. The Committee was assured that the acquisition of such items could not happen in the future because there were new systems in place in regards to procurement, security and auditing, allowing more authority to Radiation Protection Supervisors..
 - (v) Two accidents/incidents were NOTED. Appropriate corrective action had been taken.
- 46.3 The Committee APPROVED the constitution and terms of reference of the Radiological Protection Sub-Committee.

16/47 Biological/GM and Chemistry Safety Update

SAF16-P48

- 47.1 The Committee RECEIVED an update on Biological/GM Safety from the RPBCS Officer.
- 47.2 The following points were NOTED in particular:
- (i) An external biosafety audit had been carried out of biological/GM areas of the Department of Chemical Engineering. Overall the audit had been extremely positive, though it had confirmed that some central area of biological/GM safety needed to be improved and a number of actions had been identified. The auditor would return later in the year to assess the Department of Chemistry and the School of Civil and Building Engineering.
 - (ii) One incident was NOTED. The matter was being investigated by the School's Dean and the Health and Safety Service.
 - (iii) COSHH training was to be rolled out across the University.
 - (iv) As requested Schools had reviewed long-term storage of chemicals and processes for the disposal of chemicals that were no longer needed. A number of generic issues had been identified. The chemical procurement process will be reviewed in its entirety in 2017. The HSR Manager would ensure that the review also focused on training that was currently in place.
ACTION: HSR Manager

47.3 The Committee NOTED that issues regarding the disposal of chemicals sometimes occurred when a member of staff left and chemicals or equipment which they had used for their research or teaching were retained by their department. A similar situation occurred for research students, and one School was considering incorporating disposal plans into their progression requirements. The Committee AGREED that the Director of Human Resources should take the lead, working with others, to develop a staff exit strategy. The policy would cover chemicals and other items accumulated whilst a member of staff carried out their role at the University. **ACTION: Director of HR**

16/48 University Fire Officer's Report

SAF16-P49

48.1 The Fire Officer's report was RECEIVED.

48.2 The following points were NOTED:

- (i) Underlying issues associated with the fire alarm system at Holywell Park had been addressed. Engineers had been tasked with investigating an ongoing issue with an aspiration system.
- (ii) The current method of alarm isolation was being reviewed to develop a more robust management system following two incidents involving contractors in occupied buildings. The Health and Safety Service and Facilities Management were to introduce a permit process with associated documentation to ensure that contractors were aware of University requirements to avoid such occurrences happening in the future. **ACTION: Fire Officer**
- (iii) Alternative devices had been fitted in two halls of residence to attempt to reduce the number of false fire alarm activations caused by smoke/steam from cooking. The Fire Officer would report back to the Committee on the success of this intervention at the October 2017 meeting. **ACTION: Fire Officer**

16/49 Bespoke Building Design Fire Strategy Policy

SAF16-P50

49.1 The Committee RECEIVED a proposal for a Fire Design Strategy. The strategy sought to remove ambiguity regarding the standards to be applied in the development of new buildings and the refurbishment of existing buildings. It combined University Health and Safety Association and Government advice as well as building upon the University's existing good practice.

49.2 The following points were NOTED:

- (i) the Policy had not been considered by the Health and Safety Statutory Compliance Sub-Committee but had been through an extensive consultation process with the major stakeholders and had been circulated to most of the Sub-Committee's members for comment.
- (ii) proposed variations from these standards would need to be agreed in advance by the Health and Safety Service.
- (iii) Facilities Management had confirmed that they would be able to implement the standards and that the document would form part of the standards documentation that they made use of.
- (iv) Clarification would be sought from the Fire Officer on one clause within the Policy. **ACTION: Alec Edworthy**

49.3 The Committee APPROVED the new policy.

16/50 Health, Safety and Environment Short Films

SAF16-P51

50.1 The Committee NOTED the following:

- (i) the availability of a number of health, safety and environment short films and an Environmental Essentials elearning module.
- (ii) it would be possible to develop short films about other policies.
- (iii) Staff Development would be including the Environmental Essentials module on the standard induction check list.
- (iv) A prize draw would be used as an incentive to encourage staff and students to complete the module. Students would also be encouraged to complete it as part of the Green League, the inter-hall environmental competition.

50.2 The Committee APPROVED use of the films by Schools and Professional Services and of the elearning module by staff and students.

16/51 Occupational Health

SAF16-P52

- 51.1 Arising from M16/19, the Committee RECEIVED an update on Occupational Health provision at the University which included a response to issues raised in the independent Occupational Health Surveillance Audit carried out in April 2016.
- 51.2 The update noted that the Occupational Health service was under-resourced. It had received additional resource in the current year's budget. However, even with this additional resource, the staffing was well below that recommended by the Higher Education Occupational Physicians/Practitioners for universities and the accepted norm for large organizations. The levels of staffing were said to impact upon the University's ability to recruit and retain occupational health staff. Outsourcing of the service would be an alternative option for the University, and might be necessary if it was not possible to recruit to this area, but would be more expensive and less desirable.
- 51.3 Sickness absence rates represented in numbers of days lost due to sickness had risen year on year since 2013/14. However, it was not clear if there had been more incidents or whether there was now better reporting of absences. Average days off through sickness had increased in the public sector generally and were higher than the University's levels. However, it was noted that it was more appropriate for the University to use itself as a benchmark.
- 51.4 Health Surveillance processes had been interrupted because of the occupational health staffing issues and had resulted in a backlog in health surveillance activities. The update noted that the Counselling and Disability Service provided counselling for both students and staff. It had seen a rise in demand with the reductions to counselling through primary care services, and at busy times there was a waiting list for staff.
- 51.5 The response to the independent audit was NOTED.
- 51.6 The Committee NOTED the Director of HR's recommendation for the development of the Occupational Health service. He confirmed that this would allow the service to provide a reactive service. However, further resource would be required should the service need to be more proactive. The COO and Director of HR would liaise regarding the development of a plan to improve the service. **ACTION: COO, Director of HR**

16/52 Accident and Insurance Statistics

SAF16-P53, SAF16-P54

- 52.1 The papers were RECEIVED. No new insurance claims had been made against the University during the reporting period. An update on the status of claims was NOTED.
- 52.2 The following points were NOTED:
- (i) Most accidents involved cuts on sharps and glassware, and a strategy had been put in place in the area where most of these incidents occurred.
 - (ii) A comparison of the number of RIDDOR reportable incidents occurring in the second quarter of the year since 2012 revealed a near uniform upward trend. However, the increase was not

seen to be significant, particularly when seen in the context of a general increase in the number of staff over this period, and should be countered by recent interventions.

- (iii) A member noted that imago served drinks in glasses made of plastic rather than glass. The Environmental Manager confirmed that health and safety concerns were not normally valid reasons for use of plastic. **ACTION: Environment Manager to discuss this issue with imago**

16/53 Training Requirements for School and Departmental Safety Officers

SAF16-P55

- 53.1 The Committee NOTED proposals for the training of School and Departmental Safety Officers. The paper recommended an approach to training based on the risk profile of the School or Professional Service. Further developments would be made to the approach over time.
- 53.2 The Deputy COO was very supportive of the proposal and noted that it could be scaled up to meet compliance requirements. The Deputy Health and Safety Manager would contact the University Compliance Engineer to discuss use of the approach. **ACTION: Deputy Health and Safety Manager**
- 53.3 The following points were NOTED:
 - (i) it may be possible to make use of iTrent to prompt staff to undertake refresher courses.
 - (ii) it should be possible to arrange cohesive training for staff within a School.
- 53.4 The Committee APPROVED the proposals.

16/54 Health and Safety Statutory Compliance Sub-Committee

SAF16-P56

- 54.1 The Committee RECEIVED the minutes of the meeting held on 13 September 2016.
- 54.2 The following points were NOTED:
 - (i) A streamlined version of the Maturity Matrix had been distilled into a questionnaire for School contacts that could be targeted flexibly. The Matrix described all areas of compliance. An assessment had been completed and good progress was being made with the implementation of the Asbestos and Local Exhaust Ventilation Policy. The Sub-Committee was considering how to refine the matrix for Schools. This was being done on a risk basis.
 - (ii) The Chair of the Sub-Committee had met with Duty Authorised Persons over the summer to allow them to raise any issues. He intended to continue to meet with them periodically in the future.
 - (iii) The Chair would liaise with Brian Reed to establish possible colleagues to fill a vacant position of Academic representative for the Sub Committee. **ACTION: Deputy COO**
- 54.3 In considering the Sub-Committee's Terms of Reference and Constitution the Committee:
 - (i) NOTED the need to appoint an 'Academic representative with expertise in this area'
 - (ii) APPROVED:
 - a) an amendment to the Sub-Committee's constitution to change a reference to 'Electricity installation' compliance to 'Electricity'.
 - b) the addition of a technical officer to the constitution who could help with the implementation of policy within Schools.
- 54.4 The revised terms of reference and constitution would be submitted to the February HSE meeting. **ACTION: Secretary HSSC**

16/55 Safeguarding Policy

SAF16-P57

- 55.1 The Committee RECEIVED a new Safeguarding Policy. The policy would replace the Child protection Policy which had a narrower scope and which was now out of date. A draft of the new policy had been circulated widely for comment. A group would be convened to establish how the Policy would be disseminated and to put in place linked training.
- 55.2 The Committee NOTED that further changes to the Policy may be needed to ensure it covered acceptable use of computers. The Director of Student Services would liaise with Alec Edworthy to identify possible changes. **ACTION: Director of Student Services, Alec Edworthy**
- 55.3 The Committee ENDORSED the Policy subject to minor changes being made where appropriate to ensure that it took into consideration acceptable use of computers and to ensure that it could also be used on the London campus. **ACTION: Director of Student Services**

16/56 Stress Policy

SAF16-P58

- 56.1 Arising from M16/35 the Committee RECEIVED an extract from the draft Workplace Stress Report compiled from the results of the 2016 staff survey.
- 56.2 The following points were noted:
- (i) HSE had noted the revised stress policy at its June meeting. The policy was continuing to be developed.
 - (ii) The draft Workplace Stress Report would form part of the Staff Survey Report. It would require further analysis, and a plan would be constructed in due course on how to tackle the issues raised.
 - (iii) Whilst the Workplace Stress Report had yet to be analysed some common themes had become apparent from the free text comments, though there did not appear to be a uniform pattern across Schools. The report had revealed a correlation between lack of take up of management training and problem areas. This may need to be followed up in PDRs. Management experience may also need to be tested during recruitment, rather than recruiters relying upon declared experience. Management training may also need to become mandatory to ensure that all managers were appropriately equipped for their roles.
 - (iv) A member observed how few policies and procedures the University had in place as compared with other universities. The Committee was informed that Audit Committee had identified instances of local procedures being overlaid on top of University procedures. The Secretary would seek further information from the Secretary to Audit Committee. **ACTION: Secretary**

16/57 Review of Committee Effectiveness

SAF16-P59

Arising from M16/41, the Committee NOTED that the HSR Manager was to establish a working group to review the constitution, terms of reference and membership of the Committee. Members were invited to forward comments on the effectiveness of the Committee to the HSR Manager. **ACTION: Members**

16/58 Laser Safety Policy

SAF16-P60

The Committee APPROVED the revised policy.

16/59 Policy for the Management of Gas Installations

SAF16-P61

The Committee APPROVED the new policy.

16/60 Electricity at Work

SAF16-P62 (Additional paper)

- 60.1 Arising from HSSC MM16/22 the Committee RECEIVED a new policy and code of practice on electricity at work. The policy had been based upon the existing Facilities Management only policy.
- 60.2 The Committee NOTED that the documents were Loughborough specific and made no mention of the London campus. It AGREED that all health and safety policies should be reviewed to ensure that they covered the London campus. **ACTION: HSR Manager**
- 60.3 The Committee APPROVED the new policy and code of practice subject to minor corrections to be supplied by Alec Edworthy. **ACTION: Technical Services Manager, Alex Edworthy.**

16/61 Dates of Meeting in 2016/17

8 February 2017

7 June 2017

Martine Ashby
June 2016

Copyright © Loughborough University. All rights reserved.