Health, Safety and Environment Committee



AGENDA SAF18-A1

Notice of meeting

The next meeting of the Health, Safety and Environment Committee will take place at 12.30pm on Wednesday 7 February 2018 in LDN3.23 on the London Campus.

A sandwich lunch will be available for members from 12.00 noon.

Martine Ashby, Secretary

1 Apologies for Absence

2 Business of the Agenda

To give notice of intention to speak to any starred items, which otherwise will be taken without discussion. Any member wishing to speak to a starred item is asked to give notice to the Secretary by midday on Tuesday 6 February 2018.

3 Minutes

SAF17-M3

To CONFIRM the Minutes of the meeting held on 27 September 2017 subject to an amendment to M17/49.2(i) as follows:

'...The School was encouraged to consider ways in which it could <u>further</u> embed health, safety and impact upon the environment within the curriculum'.

4 Matters arising from previous meetings

SAF18-P1

- 4.1 To note actions arising from the Minutes
- 4.2 To note any other matters arising.

SECTION A – Items for Discussion

5 Health, Safety and Environment Update: School of Science

SAF18-P2

To RECEIVE a presentation by the Dean of the School of Science on health, safety, and environment arrangements in place in the School.

6 Health, Safety and Environment Update: Loughborough in London

SAF18-P3

To RECEIVE a presentation by the Dean of Loughborough in London on health, safety, and environment arrangements in place.

7 Annual Report of the Radiation Protection Officer

SAF18-P4

To RECEIVE the 2017 annual report of the Radiation Protection Officer and RECOMMEND for submission to Council.

8 Annual Report of the University's Occupational Health Service

SAF18-P5

To RECEIVE the Annual Report of the University's Occupational Health Service.

9 Performance Review

SAF18-P6

To CONSIDER the Health, Safety and Risk Manager's report, relevant performance data, and proposed health and safety reporting arrangements.

10 Risk Register

SAF18-P7

- 10.1 To RECEIVE a consolidated Risk Register report
- 10.2 To CONSIDER key issues identified by the Register.

11 Stress/Mental Wellbeing Working Party Update

SAF18-P8

To RECEIVE an update on work to develop a stress and mental wellbeing strategy and to DISCUSS the direction of travel.

12 Sustainability Targets

SAF18-P9

To RECOMMEND FOR APPROVAL the targets laid out in 1.9, 1.10, and 1.11 of the paper.

SECTION B – Starred Items for Approval

*13 Reports to Health, Safety and Environment Committee

To RECEIVE the following reports:

(i) **SAF18-P10**

Report from the Health, Safety and Risk Manager

(ii) **SAF18-P11**

Report from the Environmental and Sustainability Managers

(iii) **SAF18-P12**

Report from the University Fire Officer

(iv) SAF18-P13

Report on Accidents

(v) **SAF18-P14**

Report on Insurance Claims

*14 Health, Safety and Environment Consultative Forum

SAF18-P15

To RECEIVE the minutes of the meeting of the Health, Safety and Environment Consultative Forum held on 17 January 2018.

*15 Chemical Safety Sub-Committee

SAF18-P16

To RECEIVE the minutes of the meeting of the Chemical Safety Committee held on 19 September 2017.

*16 Health and Safety Statutory Compliance Sub-Committee

*16.1 **SAF18-P17**

To RECEIVE the minutes of the meeting held on 10 January 2018 (HSSC18-M1)

*16.2 **SAF18-P18**

To APPROVE the terms of reference of the Sub-Committee (HSSC17-P18)

*17 Radiological Protection Sub-Committee

SAF18-P19

To RECEIVE the minutes of the meeting of the Radiological Protection Sub-Committee held on 12 January 2018.

*18 Sustainability & Social Responsibility Sub Committee (SSRSC) Minutes

SAF18-P20

To RECEIVE the minutes of the meeting of the Sustainability & Social Responsibility Sub Committee (SSRSC) held on 16 January 2018 (SSRSC18-M1)

SECTION C – Items for Information

19 Any Other Business

20 Dates of Meetings in 2017/18

• 6 June 2018

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Health, Safety and Environment Committee



Minutes SAF17-M3

Minutes of the Health, Safety and Environment Committee held on Wednesday 27 September 2017

Attendance

Members:

Rob Allan, Spencer Aryeetey, Neil Budworth, Andrew Burgess, Suzanne Dexter, Sandy Edwards, Ann Greenwood, Matthew Inglis, James Jones, Mark Lewis (ab), Chris Linton (Chair), David Roomes (ab), Jo Shields, Richard Taylor.

In attendance:

Martine Ashby (Secretary), Rachael Jermyn (for 17/49), Kevin Walmsley (for 17/48), Steve Warren (for 17/49), Alison Yarrington (for 17/49).

Apologies received from:

Mark Lewis, David Roomes

17/46 Minutes

SAF17-M2

The minutes of the previous meeting held on 7 June 2017 were CONFIRMED.

17/47 Matters arising from previous meetings

SAF17-P37

- 47.1 Actions arising from previous minutes were NOTED and their current status confirmed;
- 47.2 Arising from M16/47.3 a new staff exit policy would be made available for consideration at the February 2018 meeting. **ACTION: Director of HR, RPBCS Officer**
- 47.3 Arising from M16/48.2 the Director of Infrastructure and Commercial Services would seek confirmation from Facilities Management that the permit process to ensure contractors were aware of University requirements had been implemented. **ACTION: Director of Infrastructure and Commercial Services**
- 47.4 Arising from M17/15.9 (i) the Stress Policy had been renamed the Mental Wellbeing Policy and was being drawn to the attention of staff during Staff Development training and in wellbeing referrals. Further communications regarding the change were planned. Deans and Directors of Professional Services would be reminded of the change of name. **ACTION: Director of HR**

17/48 Health, Safety and Environment Update: Head of Campus Services

SAF17-P58 - Presentation given at meeting

- 48.1 The Committee received a presentation by the Head of Campus Services on health, safety and environment arrangements in place for Campus Services.
- 48.2 Members noted in particular the significant amount of business that took place with external suppliers which could potentially be provided in house. Aside from the issue of depriving the University of business in a time of austerity, the purchase of goods and services from outside the University exposed it to wider issues such as an inability to guarantee food safety and the possibility that it might unwittingly give business to suppliers who had poor employment practices.
- 48.3 Weblinks to the Campus Services and School of the Arts, English and Drama presentations would be circulated to members. **ACTION: Secretary**

17/49 Health, Safety and Environment Update: School of the Arts, English and Drama

SAF17-P59 – Presentation given at meeting

- 49.1 The Committee received a presentation by the Dean of the School of Arts, English and Drama on health, safety and environment arrangements in place within the School.
- 49.2 The following points were noted in particular:
 - (i) The Committee considered that it was important for the School's academic staff to be mindful of health, safety and environmental issues for all aspects of their work. Health and safety processes should be integral to student activities and should be identified early on when student projects were being planned. The School was encouraged to consider ways in which it could embed health, safety and impact upon the environment within the curriculum.

 ACTION: Dean of AED
 - (ii) Whilst Loughborough College's campus was a smoking free zone, the School of the Arts, English and Drama was not. This led to staff and students from the College smoking on land adjacent to the School's buildings. The Committee agreed that the University's estate on that site should become a smoking free zone. **ACTION: COO**
 - (iii) Parking restrictions on Loughborough College's campus were strictly enforced. This resulted in some individuals who were unable to park at the College parking on the University grounds, including in areas where no parking was permitted. The Operations Manager would brief the COO with a view to Security increasing its patrols of the area around the School's buildings. **ACTION: AED Operations Manager, COO**
 - (iv) A recent incident where a pedestrian had been knocked over by a cyclist when joining the path running along the University side of Epinal Way had highlighted the need for signage to warn pedestrians to watch out for cyclists when going through gaps in the perimeter hedge. The Director of Infrastructure and Commercial Services would ask Facilities Management to erect warning signage on the University side of the hedge, and Leicestershire County Council would be asked to erect similar signage on the path itself. In addition the Sustainability Manager would consider whether the height of the hedge should be reduced or the gaps in the hedge increased in size. **ACTION: Director of Infrastructure and Commercial Services & Sustainability Manager**
 - (v) The School should ensure that the job descriptions of its health and safety representatives also included an environmental remit. **ACTION: AED Operations Manager**
- 49.3 The Committee reflected upon the presentations given by Campus Services and School of the Arts, English and Drama representatives. The presentations were seen to be a helpful way for the Committee to receive assurance on HSE matters. The Secretary would arrange for future presentations to be made available to members before the meeting so that their content could be digested in advance of meetings. **ACTION: Secretary**
- 49.4 The Committee considered the proposed order in which presentations would take place at forthcoming meetings, as listed in SAF17-P39. It agreed that the meeting at which Loughborough University London would give its presentation should take place on the London campus. The

Deputy Vice-Chancellor and Health, Safety and Risk Manager would decide when the meeting should take place. **ACTION: Deputy Vice-Chancellor, HSR Manager**

17/50 Constitution, Terms of Reference and Membership

SAF17-P38, SAF17-P39

- 50.1 The Constitution, Terms of Reference and Membership of the Committee for 2017/18 were APPROVED subject to the Deputy Chief Operating Officer being replaced with the Director of Infrastructure and Commercial Services & Sustainability Manager and the addition of the name of the UNISON representative. **ACTION: Secretary**
- 50.2 The proposed business for forthcoming meetings was APPROVED subject to the following additions/changes:

Standing item for all meetings

Occupational Health Report (where no Occupational Health Annual Report)

February 2018 meeting

Addition of Occupational Health Annual Report (based on previous academic year's data)

June 2018 meeting

Addition of Environment Compliance Report

Facilities Development moved from September 2018 meeting

September 2018 meeting

Addition of Environment Policy Review

Facilities Services moved from June 2018 meeting

50.3 Proposed steps for the establishment of the Health, Safety and Environment Consultative Forum were APPROVED. Minutes of the Forum's meetings would be received by the Committee as a starred item. **ACTION: Secretary**

ACTION: Secretary

17/51 Health and Safety Annual Report

SAF17-P40

The Committee RECEIVED the Health and Safety Annual Report.

17/52 Sustainability Action Plan

SAF17-P41

The Committee RECEIVED the Sustainability Action Plan, noting that it had previously been endorsed by ALT and the Sustainability and Social Responsibility Sub-Committee.

17/53 Sustainability Annual Report

SAF17-P42

The Committee RECEIVED the Sustainability Annual Report.

17/54 Annual Report of the University's Occupational Health Service

SAF17-P43

- 54.1 The Committee RECEIVED the Annual Report of the University's Occupational Health Service for 2016/17.
- 54.2 The following points were NOTED in particular:
 - (i) There had recently been significant investment in the Occupational Health Service resulting in increases in staffing levels and improvements in provision.

- (ii) Recent health and wellbeing initiatives were helping to address instances of stress amongst staff. Planned initiatives would aim to try to prevent instances of stress in the future.
- (iii) The University was to introduce an Employee Assistance Plan (EAP) in coming months which would be of benefit to both employees and their families.

17/55 Risk Register

SAF17-P44

- 55.1 The Committee received details of progress in implementing the Risk Register, noting that the programme for implementation was on target.
- 55.2 A consolidated report would be submitted to the February 2018 meeting. **ACTION: Deputy HSR Manager**

17/56 Reporting of Health and Safety Performance Measures

SAF17-P45

- 56.1 The Committee APPROVED proposed health and safety reporting arrangements. Council would be informed of these arrangements at its next meeting. **ACTION: Deputy Vice-Chancellor**
- 56.2 The Committee AGREED that Senate and Council would continue to receive minutes of its meetings in the future. However, its summary reports would be replaced in the future by the monthly Health and Safety Bulletins. **ACTION: HSR Manager**

1757 Stress/Mental Wellbeing Working Party Update

SAF17-P46

- 57.1 The Committee RECEIVED an update on work to develop a stress and mental wellbeing strategy and commented on the direction of travel.
- 57.2 The Committee NOTED that a reference to the University's effectiveness in managing stress and mental wellbeing was misleading and should be altered.
- 57.3 The Committee NOTED that the working party was looking at a range of different interventions that could be applied and at this stage did not wish to make assumptions about particular areas that needed to be targeted.

17/58 Post Grenfell Tower Fire Update

SAF17-P47

The Committee NOTED a report on the University's response to the Grenfell Tower fire and was reassured that all necessary action had been taken.

17/59 Reports to Health, Safety and Environment Committee

The following reports were RECEIVED:

(i) **SAF17-P48**

Report from the Environmental and Sustainability Managers

(ii) SAF17-P49

Radiation Protection Update Report

(iii) **SAF17-P50**

Report from the University Fire Officer

(iv) **SAF17-P51**

Report on Accidents

(v) **SAF17-P52**

Report on Insurance Claims

(vi) **SAF17-P53**

Report on Health and Safety Training for general staff and safety officers

17/60 Biological/GM and Chemical Safety Update including New Chemical Safety Policy

SAF17-P54

- 60.1 The Committee RECEIVED a Biological/GM and Chemical Safety update.
- 60.2 The Committee APPROVED a new Chemical Safety Policy.
- 60.3 The Committee APPROVED the proposed terms of reference and membership of the newly established Chemical Safety Committee.

17/61 Health and Safety Statutory Compliance Sub-Committee

SAF17-P55

The Committee RECEIVED the minutes of the meeting held on 12 September 2017.

17/62 Radiological Protection Sub-Committee

SAF17-P56

The Committee RECEIVED the minutes of the meeting held on 16 August 2017.

17/63 Environmental Policy (ADDITIONAL ITEM)

SAF17-P57 – Additional paper

The Committee APPROVED a revised version of the existing Environmental Policy.

17/64 Dates of Meeting in 2017/18

7 February 2018 6 June 2018

Martine Ashby
October 2017
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Health, Safety & Environment Committee



Paper Title: Matters Arising from Previous Meetings

Author: Secretary

1.	Specific Decision Required by Committee	To note the status of matters arising from previous meetings
2.	Relevance to University Strategy	Means for the Sub-Committee to monitor agreed actions which may be associated with the University Strategy
3.	Executive Summary	The table overleaf details the outstanding matters arising from previous meetings of the Health, Safety and Environment Committee
4.	Essential Background Information	Previous minutes of HSE Meetings
5.	Risks, Risk Mitigation and Governance/ Accountability	To ensure actions taken following HSE meetings
6.	Implications for other activities	n/a
7.	Resource and Cost	None
8.	Alternative Options considered	None
9.	Other Groups/Individuals consulted.	Name individuals
10.	Future Actions, Timescales & Frequency of Review by this Committee.	Next opportunity for review: Meeting in June 2018
	Success Criteria (KPIs)	None
12.	University Executive comment (required for Council papers only)	n/a

Matters Arising From Previous Meetings

Meeting	Minute	Action	Responsible	Updates
SAF16-M3	47.2	Review of chemical procurement process in 2017 to also focus on existing training	HSR Manager	Sept 17 Update from HSR Manager: A new policy and guidance has been produced and training will be rolled out in 2016/17. AED have been prioritised for this training. The guidance and training includes the purchasing requirements relating to hazardous substances Sept 17 Update: HSR Manager to discuss with School Jan 2018 Update: New processes have been introduced to capture chemical purchases and chemical safety training is being progressively deployed – School of Arts were the first to receive this training. The training also references the procurement arrangements. A recent trawl undertaken to allow us to complete our chemical weapon precursor declaration revealed significant gaps in compliance with the procedure. Deans and Ops managers are to be contacted specifically on this issue.
SAF16-M3	47.3	Take lead, working with others, in developing a staff exit strategy.	Director of HR+ RPBCS Officer	Sept 17 Meeting: Staff Exit Policy to come to Feb 2018 meeting Jan 2018 Update: Report will be on next HSE Committee agenda under the Bio/Chemical safety section.
SAF16-M3	48.2 (ii)	Introduce permit process to ensure contractors aware of University requirements	Fire Officer	Sept 17 Update: Update in Fire Officer Report (see also SAF17-M2 33.2) Sept 17 Meeting: Dir of Infrastructure & Comm Services to seek update Jan 2018 update: Now in place – awaiting feedback on initial deployment
SAF17-M2	33.2	Complete work to develop a workable control system to isolate fire alarms within a month of the June meeting	Facilities Services (Fire Officer to report back)	Sept 17 Update: Update included in Fire Officer Report (see also SAF16-M3 48.2 (ii)) — still awaiting confirmation from Facilities services that the agreed process has been implemented) Jan 2018 update: Now in place — awaiting feedback on initial deployment
SAF17-M1	15 9(i)	Liaise about communication strategy and approval process for the revised Stress Policy	Chair + Director of Human Resources	Sept 17 Update from HSR Manager: This will form part of the wider mental well-bring communication strategy during 2017/18 Sept 17 Meeting: Further communications planned. Jan 2018 Update: Ongoing comms plan developed on Mental; Wellbeing
SAF17-M2	31.2	Provide HSE with details of new Ionising Radiation Regs requirements and implications for University once confirmed	RPBCS Officer	Sept 17 Update: Update to be included in Radiation Report Sept 17 meeting decision: stay on list Jan 2018 Update: Update in Radiological Protection Annual Report on agenda

Meeting	Minute	Action	Responsible	Updates
SAF17-M2	37.3	Training proposals to be used for duty holders for compliance purposes.	HSE Manager	Sept 17 Update from HSE Manager: A gap analysis has started, but this is at an early stage Jan 2018 Update: Training matrix updated
SAF17-M3	47.4	Remind Deans and Directors of Professional Services of Stress Policy name change	Director of HR	
SAF17-M3	49.2(i)	Consider ways in which School can embed health, safety and impact on environment within curriculum	Dean of AED	
SAF17-M3	49.2(ii)	University's estate on Lough College site to become a smoke free zone	COO	
SAF17-M3	49.2(iii)	Brief COO on parking issue with a view to Security increasing patrols of area around School's buildings	AED OPs Manager + COO	
SAF17-M3	49.2(iv)	Ask FM to erect warning signage on Univ side of Epinal Way hedge & ask Leics Co Council to erect signage on path itself	Dir of Infrastructure & Commercial Services	
SAF17-M3	49.2(iv)	Consider whether height of Epinal Way hedge should be reduced or gaps in hedge increased in size.	Sustainability Manager	
SAF17-M3	49.2(v)	Ensure job descriptions of H&S reps also include environmental remit	AED OPs Manager	
SAF17-M3	49.3	Future presentations to be made available to members before meetings	Secretary	
SAF17-M3	49.4	Decide when HSE should hold meeting in London	DVC & HSR Manager	Jan 2018 Update: Feb 2018 meeting in London
SAF17-M3	50.3	Minutes of HSE Consultative Forum meetings to be received by HSE as starred items	Secretary	Jan 2018 Update: Done
SAF17-M3	55.2	Consolidated risk register report to be considered at Feb 2018 meeting	Deputy HSR Manager	Jan 2018 Update: On Agenda
SAF17-M3	56.1	Inform Council of proposed health and safety reporting arrangements	DVC	Jan 2018 Update: Work ongoing to improve data and reporting – currently in transition between old paper / Excel based system and SHE reporting system. Report production should become easier and more accurate over the next 12 months.
SAF17-M3	56.2	HSE summary reports to Council to be replaced by the monthly Health and Safety bulletins	HSR Manager	Jan 2018 Update: Done



School of Science HSE Committee Progress, Plans & Challenges

Mark Biggs and Norma King

Progress

Transformation of HSE Structure

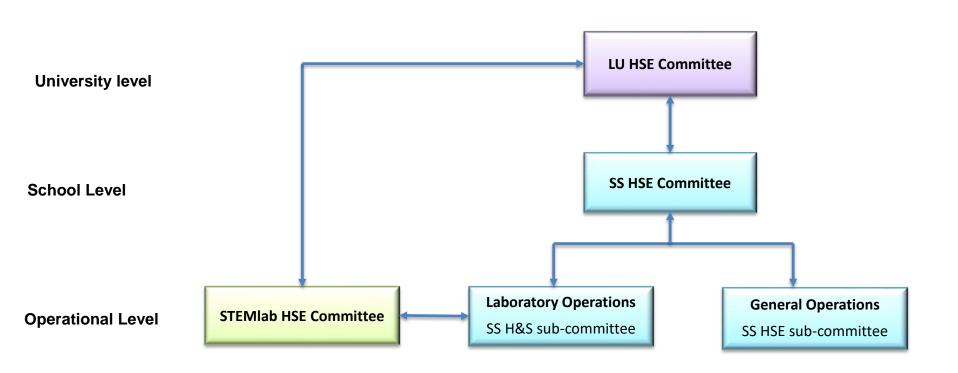
- o Established new HSE committee structure, including terms of reference, standardised agenda and membership of each committee
- Move from departmental based structure to School wide activity based structure
- Creation of Laboratory Operations sub-committee and General Operations sub-committee
 with academic Professorial Chair for both sub-committees
- o Identification of a zone based structure to manage operational health & safety
- o Briefing to staff on structural committee changes via Staff forum and Sci-News

Additional Progress

- Introduction of Mental Health First Aider Scheme (MHFA) 15 staff trained as MHFAs who feel they are adding value to the School in their new role. Termly feedback meetings to Dean and Operations Manager
- Compilation of School risk register
- Creation of schedule of programmable events(SPE)
- o Creation of training need analysis (TNA) record for Staff
- School order form amended which requires all staff to complete COSHH and hazardous item section before any purchase is authorised



HSE Reporting Structure



Plans

Embedding Health & Safety Structure

- Appointment of academic zone leads and establishment of H&S responsibilities within each zone
- Combined safety and research seminars for all PGR students in Physics and Chemistry
- Fostering a culture that encourages open reporting and learning from all H&S incidences and in particular near misses
- o Monitoring H&S laboratory protocols with emphasis on preparation and implementation of risk assessments
- R.A.G. rating reports from sub-committees to main School HSE committee

Additional Plans

- Working with sustainability team to reduce printing charges
- Safe disposal of chemicals from Chemistry and Physics that are no longer required prior to W building move
- o Completion of SPE
- Completion of TNA for staff and PGR students
- Documentation and dissemination of ethics approval process



Challenges

Health & Safety within W Building

- o Infrastructure imposed challenges which are required to be addressed by a management solution e.g. safe transportation of chemicals, flammable gas use within labs
- Comprehensive H&S induction required for all staff working in W building

General Health & Safety Challenges

- Manpower to undertake all statutory compliance requirements
- Crossing between Schofield and Haslegrave buildings identified as 'high risk' on risk register and reported to FM

Embedding Health & Safety

o Changing academic mindset in some areas so that H&S is seen as core part of activities rather than 'an add-on' e.g. completion of risk assessments



Health, Safety & Environment Committee



Re: Date 7th February 2018

Paper Title: Occupational Health Report 2017

Origin: Director of Human Resources

Specific Decision Required by Committee	For information
Relevance to University Strategy	'Investing in Our Staff' The Occupational Health service focusses on the prevention of ill health and the promotion of health and wellbeing at work. This involves the delivery of services that enable the University to meet its statutory requirements under health, safety and employment law and which are designed to protect employees' health at work by ensuring that health related problems are effectively managed.
3. Executive Summary	This report provides an update in relation to the University's Occupational Health provision; including current staffing levels, sickness data, OH activity and, health surveillance.
Essential Background Information	As previously reported, the OH section has historically suffered from significant under-resourcing, as well as associated difficulties in recruitment and retention. The staffing levels were increased in 2016/7 and further improvements have been funded 2017/8. The aim is to bring the University up to at least 50% of the HEOPS recommended levels for a University of our size.
5. Risks, Risk Mitigation and Governance/ Accountability	An effective OH service is vital to the well-being of the University's staff and the consequential impact on all of the University's activities. Health surveillance, in respect of specific roles and processes within the University, is undertaken through OH and is necessary to meet statutory requirements.
Implications for other activities	The effectiveness of OH will directly impact on staff sickness levels, capability processes and ill health pensions, thereby affecting staff costs for the Schools/Professional Services.
Resource and Cost Alternative Options considered	n/a n/a
Other Groups/Individuals consulted.	n/a
10. Future Actions, Timescales and Frequency of Review by this Committee.	An annual sickness absence report with associated stats e.g. health surveillance etc
11. Success Criteria (KPIs)	 A reduction in staff absence, below HEI norm. Timely and safe return to the workplace after sickness Compliance with all health surveillance requirements Minimal waiting lists for OH and Staff Counselling.

Occupational Health Report (2017)

Introduction

The University's Occupational Health service is part of the Human Resources Department and currently comprises two Occupational Health Advisers (i.e. OH qualified registered nurses) and a part-time Administrator. In addition, a Consultant Occupational Health Physician is bought in from Nottingham Hospitals NHS Trust. Some clinical services e.g. Blood tests and immunisations, are still bought in from the campus GP practice, but following the OH relocation to the medical centre and when all staff are in post, it is envisaged that, with the appropriate training, our OH Advisers should be able to provide this service, in the future.

As previously reported, the historical under-resourcing of OH contributed to an inability to cope with the demands on the service and this was compounded by consequential recruitment and retention difficulties. This in turn led to a significant backlog in work and an inadequate service, with long waiting times. Statutory requirements, regarding health surveillance for staff involved in specific hazardous processes, were not comprehensive and left the University vulnerable in terms of statutory compliance and potential legal claims. There was no capacity for pro-active health promotion activities.

As a result of last year's increases in budget, which led to an increase in the OH consultant time from ½ day per fortnight, to one day per fortnight and an increase to the administrative support upto 0.73 fte, there have been improvements to the service and waiting times following referral, are markedly improved. Details of OH activity are shown in Appendix 1. However, unfortunately we are under strength in terms of OH Advisers at the current time, following the departure of the OH Manager at Christmas, but we are currently advertising for a full time OH Adviser as replacement. In addition, we are seeking expressions of interest for providers of OH medical services, for the provision of the OH consultant input from April, when the current contract expires.

Health surveillance

Health surveillance is the systematic assessment of employees exposed or potentially exposed to occupational hazards. This assessment monitors individuals for adverse health effects and determines the effectiveness of exposure prevention strategies. Information is provided to OH to activate the health surveillance process through I-Trent (HR system) upon appointment of new staff. Whilst the additional OH staffing resources has enabled us to clear the backlog and identify 'hot-spots', it has also facilitated a deeper review, which has revealed that a significant number of long-serving staff, particularly in FM services, have not had the right health surveillance checks for their work activities. OH, is therefore currently working with the Health and Safety team, HR Partners and FM managers, to address the issue and ensure the University is legally compliant

Sickness Absence

Sickness absence and trends are shown in Appendix 2 which details rates by School/Professional Service and job family etc. (n.b. more detailed information is contained within the annual HR report to the Human Resources Committee and to relevant senior managers). Key points to note:

- There has been a significant increase in staff numbers over the past 4 years, resulting in a related increase in the number of days lost.
- As with other HEIs, there is an underreporting of sickness absence by academic staff especially for absences of 1-7 days.
- There has been a rise in stress related illnesses and anxiety/depression and this is a trend shared by other large employers.

- The University participates in the UCEA annual sickness absence survey, for bench-marking services. The most upto date figures available are for 2016/7, but indicate that we are on a par with other HEIs. (HEI average 5.8 days)
- Wider benchmarking data is available through the CIPD, against which we compare favourably in relation to public sector employers, who share the same sick pay entitlements as us. Again, the data relates to 2016 (average 6.3 days across all sectors and 8.6 for public sector).

Stress-related Illnesses

Stress Related illnesses are a growing concern across all sectors of work, including Higher Education All employers have legal responsibility under the Health and Safety at Work etc Act (1974) and Management of Health and Safety at Work Regulations (1999), to ensure the health safety and welfare at work of their employees. This includes minimising the risk of stress-related illness or injury. Details of stress-related illnesses are shown in Appendix 3. OH and HR are currently working with the health & safety department, SDC, chaplaincy, marketing and the counselling service to promote a number of initiatives to help reduce the effects of stress, e.g.:

- OH referrals to counselling service.
- Pilot Employee Assistance Programme (EAP) service for year from Dec 2017.
- Increasing sports involvement for staff.
- 'Take Your Lunch Hour'.
- Discouraging 'out of hours' email culture.
- Staff sports and exercise offers.

Staff Counselling

A free counselling service is available to staff through the University's Counselling and Disability Service. Within this service, a resource of 1.1 fte is provided for staff counselling, although rather than a designated counsellor dealing with staff, the resource is split across a number of counsellors whose principal focus is students. The downside of this arrangement is that at times of high student demand the staff resource can be compromised. Currently the waiting time for staff, post assessment is 10 - 12 weeks.

EAP

In December, the University commenced a 12 month pilot EAP, in conjunction with an external provider, Rehabworks, one of the leading providers in the field. The service is available to staff via telephone and on-line, with both being available 24/7 and 365 days a year. When telephoning, staff are always able to speak to a qualified counsellor for emotional support and can also access a wide range of information, including financial and legal. In addition, staff on the London campus are able to access face to face counselling as this could not previously provided from the University's Loughborough based counselling service.

The pilot will be evaluated at the end of the year to determine if it has proved beneficial, in which case a budget submission will be made for its continuation. Many large employers have found such a service to be of benefit to staff and a contributing factor to the reduction of stress related illness and early indications on the pilot are very positive.

Mental Health First Aiders

In a further initiative to improve the mental health well-being of staff, the H & S team has worked with the senior management team of the School of Science to establish a pilot scheme of training a number of Mental Health First Aiders to provide a resource to support staff at times of need within the workplace. The initiative has proved to be a successful addition to the suite of initiatives being pursued and subject to the availability of the necessary funding, will be rolled out further across the University.

Eye Tests

The processing of eye test vouchers for DSE users continues to be administered through OH, although the service is currently provided through the independent opticians based on the campus. However, we are currently considering using a larger organisation such as 'Spec Savers' or 'Vision Express', to provide the service. This would enable staff to be able to have greater flexibility as to when and where they access can the tests, as the onsite provision is only available on weekdays. The recent increase in the OH administrative resource (Jan 2018) will enable this initiative to be progressed.

III Heath Retirements

The increase on OH consultant time (wef Jan 2018) has led to faster processing of ill health retirement applications through USS and LGPS. However, we are experiencing some issues with the LGPS process resulting in the need to get suitable external independent reports, at significant additional cost.

National Institute for Health and Care Excellence (NICE)

The Director of HR, has recently been appointed to the NICE committee for Workplace Health Guideline Development, which will be updating at the public health guideline on 'Workplace health: long-term sickness absence and incapacity to work' in the light of recent research based evidence which may improve current guidance for workers with a range of long term conditions such as back pain or mental health issues.

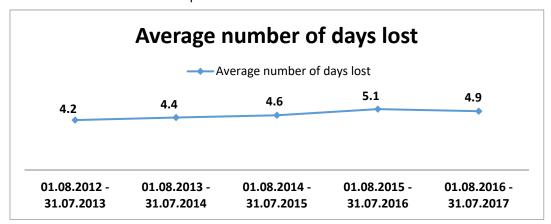
Rob Allan Director of Human Resources

SICKNESS ABSENCE

The University's sickness absence policy and procedure was introduced in 2010 and training courses have been ongoing and are readily available to assist managers to effectively manage sickness

Number of days lost due to sickness absence Note:

- The absence data is as at the 1st August until 31st July each year
- Due to the wide range of working patterns across the University, sickness absence has been calculated outside of the system via a consistent postulation of everyone who has taken a sickness absence, works a five day working schedule, all year round
- If a person has two positions, their absence is routinely recorded against both positions; therefore for the 'number of days lost' this is taken into account. The 'average number of days lost' figure is calculated based on the number of positions and this is relative to the duplicated absence.



- The above graph represents the average number of days lost at the University due to sickness absence per position.
- The results compare favourably to the UCEA results for 2016 2017, where the sector average for all staff is 5.8 days lost. The UCEA results state that 'HE institutions with between 3000 and 3999 staff have, on average, the highest number of days lost.'

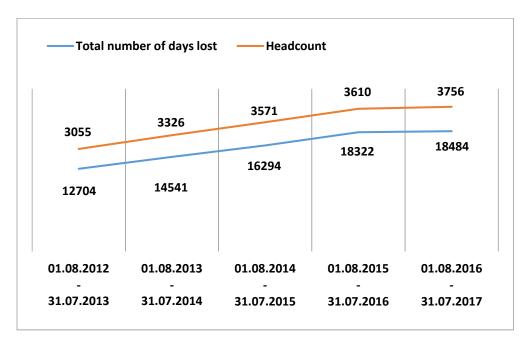
Number of days lost due to mental ill health

•	01/08/2012 - 31/07/2013	01/08/2013 - 31/07/2014	01/08/2014 - 31/07/2015	01/08/2015 - 31/07/2016	01/08/2016 - 31/07/2017	Trend line
Total number of days lost	12704	14541	16294	18322	18484	
Headcount (number of positions) as at 1st August	3055	3326	3571	3610	3756	
Days lost due to Anxiety, depression, nervous illness	759	1183	1498	1579	1429	
Days lost due to Stress related absence	980	1274	1335	1843	1851	

Note:

- The above figures show a general upward trend in absence, however, it is recognised that the increase in headcount would be a contributing factor and the following chart illustrates this further
- Looking specifically at the reasons for absence, mental wellbeing related episodes account for 17% of the total absences; the UCEA results for 2016 2017 have a correlation to the University's results where the main cause of sickness absence is in relation to mental health, accounting for 23% across the HE sector.

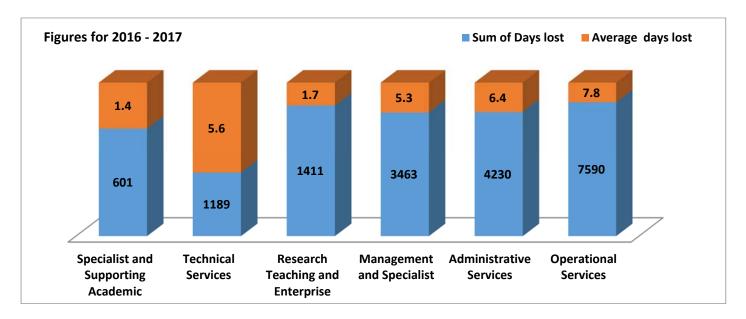
Correlation between sickness absence and headcount



Number of sickness episodes
The below table represents the number of absence occurrences.

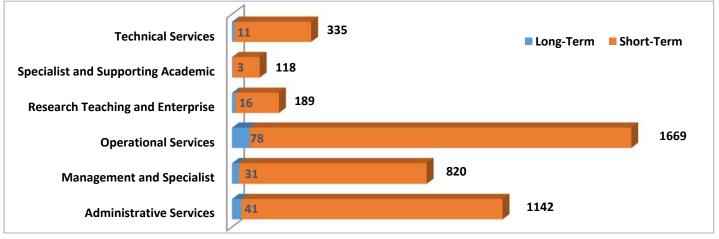
	01/08/2012 - 31/07/2013	01/08/2013 - 31/07/2014	01/08/2014 - 31/07/2015	01/08/2015 - 31/07/2016	01/08/2016 - 31/07/2017	Trend line
Total number of absence occurrences	3614	3365	3988	4238	4453	
Total number of individuals taking absences	1425	1409	1568	1582	1623	
Number long term absence occurrences	141	164	205	225	180	
Number short term absence occurrences	3473	3201	3783	4013	4273	

Number of days lost by Job family



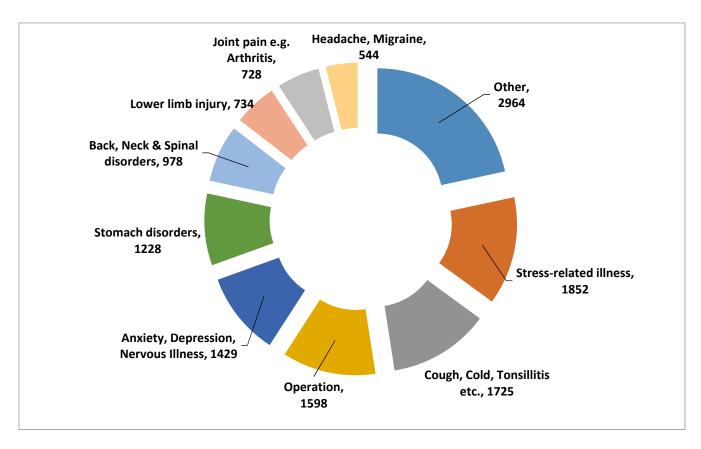
Note: The UCEA results are comparable to the University, where the sector's highest staffing group for days lost is Manual staff (equivalent to Operational Services) and the lowest staffing group for days lost is Academics (equivalent to RTE and SSA's)

Number of long-term (4 weeks+) and short-term occurrences by Job family



Highest reasons for sickness absences

The below chart represents the highest ten reasons for sickness absence between August 2016 – July 2017; in relation to the number of days lost



Note:

- The highest sickness reasons are marginally the same as last year with minimal fluctuations in the figures apart from the tenth highest reason, where in 2015 2016 this was 'Chest Conditions' but in 2016 2017 this was 'Headache/Migraine'
- The reason of 'Other' is where the standard set reasons for absence could not define the reason for absence and therefore this reason has been used instead
- The UCEA results for 2016 2017 for the reasons for sickness absence again shows a correlation to the University
 results where it reports on the HE sector results as 'Stress related illness being the highest reason for absence
 followed by Cold, Operations, Stomach Disorders and then Musculoskeletal.

Number of days lost by School

School	01/08/2012 - 31/07/2013	01/08/2013 - 31/07/2014	01/08/2014 - 31/07/2015	01/08/2015 - 31/07/2016	01/08/2016 - 31/07/2017	Trend line
School of Aeronautical Automotive Chemical & Materials Engineering	682	502	641	411	640	
School of Architecture Building and Civil Engineering	482	456	477	562	211	
School of the Arts English and Drama	422	789	1119	638	656	

School of Business and Economics	366	586	782	719	1038	
Loughborough Design School	339	218	613	481	367	
Loughborough University London	0	2	0	26	203	
Professional Services	8963	9788	10062	12998	13059	
School of Science	396	320	691	659	444	
School of Social Political and Geographical Sciences	293	542	309	311	299	
School of Sport Exercise and Health Sciences	297	583	774	407	467	
Wolfson School of Mechanical Electrical and Manufacturing Engineering*	441	743	804	1093	1099	
Centre for Engineering and Design Education**	23	13	23	16	0	

^{*}includes School of Electronic Electrical and Systems Engineering
** School has now been dissolved

Number of days lost by Professional Services

Professional Services	01.08.2012 - 31.07.2013	01.08.2013 - 31.07.2014	01.08.2014 - 31.07.2015	01.08.2015 - 31.07.2016	01.08.2016 - 31.07.2017	Trend Line
Academic Registry	210	177	149	430	462	
Arts Centre	0	0	1	2	1	
Campus Services***	400	398	2809	3744	4298	

	ı	ı	•	.		ı
Centre for Academic Practice	112	60	82	64	121	
Corporate Communications	286	459	147	0	0	
Corporate Services	0	182	990	927	516	
Development & Alumni Relations Office	65	168	6	0	0	
Enterprise Office	149	244	268	108	419	
	5011	5786	2472	3922	Facilities Administration 282	
Facilities					Facilities Development 1	
Management				3922	Facilities Management 1126	
					Facilities Services 1444	
Finance Office	265	110	123	288	281	
Graduate School	4	7	0	0	0	
Professional Services	01.08.2012 - 31.07.2013	01.08.2013 - 31.07.2014	01.08.2014 - 31.07.2015	01.08.2015 - 31.07.2016	01.08.2016 - 31.07.2017	Trend Line
Health & Safety	0	0	0	0	62	
Human Resources	195	190	178	451	506	

IT Services	626	611	435	614	816	/
Marketing and Advancement	0	0	368	785	651	
Research Office	54	62	156	177	203	
Sports Development Centre	652	294	546	468	579	
Student Services	499	589	874	825	1024	
University Library	362	395	425	146	161	
Vice-Chancellor's Office	73	55	34	49	106	

^{***}Campus Services: Sickness absence rates fluctuations are a consequence of the headcount changes. Historically, Campus Services sat within the Facilities Management department but moved into its own professional service department when the headcount grew into its own function by 2014. The department has been subjected to a number structural changes and the department headcount has grown consistently with a peak in 2016/2017 with an increase of 22% resulting from the TUPE of retail staff, inclusion of sports grounds and domestic services from the Facilities department.

APPENDIX 2

Total	145
Update on progress since last referral	2
Stress related illness	22
Stress	4
Recurrent short term sickness	2
Long-term sickness and absence	7
Long term sickness	43
Frequent short term absence	1
Fitness to attend meetings	1
Fitness for work	6
DSE issues	1
At work with health problems	55

Referrals received and appointed

FFW-Fork Lift Truck Driver	10
FFW-Working at Height	17
HS-Asbestos	15
HS-COSHH (Bio- Hep B)	8
HS-COSHH (Cadmium)	6
HS-COSHH (Respiratory assessment)	156
HS-COSHH (Skin Assessment)	69
HS-Hand Arm Vibration (HAV's)	30
HS-Hearing conservation (Audiometry)	33
WTD-Night worker	9
Total	353

Health Surveillance/screening appointments

NHS passports and Biological agents processed: 28
Fitness to Teach OH applications processed: 87

Health, Safety and Environment Committee



Paper Title: Performance Review

Origin: Neil Budworth Date: 29/1/18

Decision Required by Committee	To CONSIDER the HSE reporting arrangements across the University
2. Executive Summary	The attached tables contain the following information for both Schools and Professional services: No of Audits YTD (Jan-Dec 2017) No of Audits planned for 2017 No of Safety Committee Meetings YTD (Jan-Dec 2017) No of Safety Committee meetings planned for 2017 Date agreed for risk register workshop Date for risk register workshop Workshop completed Risk Register finalised Action plan produced Number of incidents YTD (Oct -Dec 2017) Number of incidents YTD (Jan-Dec 2017) Incident rate per 1,000 staff (Jan - Dec 2017) No. of staff receiving training YTD (Jan-Dec 2017) % Planned audit carried out % Planned Safety Committees Carried Out Each has then been allocated a red-amber-green rating. Supplementary notes explain the situation in greater detail.
Committees/Groups previously considering item.	None

Schools

Data from January to December 2018

Red	< 50%
Amber	51-75%
Green	>76%

Green			270%									Incident	No. of			
School	No of Audits YTD (Jan- Dec 2017)	No of Audits planned for 2017	No of Safety Committee Meetings YTD (Jan- Dec 2017)	No of Safety Committee meetings planned for 2017	Date agreed for risk register workshop	Date for risk register workshop	Workshop completed	Risk Register finalised	Action plan produced	Number of incidents YTD (Oct -Dec 2017)	Number of incidents YTD (Jan-Dec 2017)	rate per 1,000 staff (Jan - Dec 2017)	staff receiving training YTD (Jan-Dec 2017)	% Planned audit carried out	% Planned Safety Committees Carried Out	Notes
SoAACME	6	4	6	6	Yes	23/05/2017	Yes	Yes	In progress	2	10	3.5	Data not available	150.0	100.0	Generally good engagement with the safety contacts identifying and tackling issues. The school have good safety support locally, which is important given the nature of the activities undertaken. The school holds regular health and safety meetings which are well planned and well attended. Audits are ahead of plan. There is a significant volume of work relating to the relocation of staff and refurbishment of S building. However the school is not as yet developing and action plan based on the risk register and say that given their current workloads they cannot see a likely time when this might happen. The school are also currently trying to identify Duty Authorised Persons (DAPs) for compliance areas (David Howell etc). A consultant has been engaged to develop the explosive atmospheres assessments for the school due to the complex nature of these assessments. The have been issues relating to the use and storage of chemicals but the school is active in trying to identify and tackle these issues.
School of the Arts, English & Drama	2	2	4	4	Yes	08/09/2016	Yes	Yes	In progress	3	3	1.1	Data not available	100.0	100.0	Work is underway to start to develop better engagement with the academic community, but progressing slowly. The development of an action plan following the risk register session has stalled – there are no plans to address this in January (risk register on 8/9/2016) Following a number of issues a bespoke chemical safety training package is being delivered to Arts, English and Drama staff starting on 17th January 2018. During the last quarter a number of students were identified not wearing PPE, this seems to be common in some area and the academic leads in those areas do not appear to be reinforcing safe behaviour. This is particularly concerning given the chemical related incidents over the last year (possible sensitisation in the darkroom and a possible case of Byssinosis).

School of Business and Economics	1	1	3	3	Yes	12/04/2017	Yes	Yes	In progress	1	6	2.1	Data not available	100.0	100.0	Low risk school , good engagement status green
School of Science	14	2	7	7	Yes	15/12/2016	Yes	Yes	In progress	5	8	2.8	Data not available	700.0	100.0	Good engagement from school, but the various moves are proving challenging. School recognises that stress / mental health issues are a challenge and have deployed mental health first aiders which are working well. School has been proactive in arranging support sessions at lunchtimes eg Mindfulness There have been issues relating to physics - an academic has been subject to discipline, but other challenges remain. A detailed audit by the Health and Safety service will be conducted at the end of Q1 2018
SSEHS	15	7	3	4	Yes	08/11/2017	Yes	Yes	In progress	2	7	2.5	Data not available	214.286	75	50 infection prevention audits of clinical areas. School are proactive in identifying and managing risk. Good local support and dialogue.
Wolfson School of Mechanical Electrical & Manufacturing Eng.	7	2	3	4	Yes	02/02/2017	Yes	Yes	In progress	4	14	4.9	Data not available	350	75.0	The school has suffered a number of near misses with windows falling outside and into the school. This issue is being followed up with the Facilities Services team. There was also a high potential incident in the Wolfson workshop where a member of CREST staff was cutting steel plate on a guillotine and the sharp edge of the steel rode up over the edge of the protective gloves and cut the wrists of the person concerned requiring hospital admittance. The arrangements in this area are being reviewed.
ABCE	2	2	3	3	Yes	26/09/2017	Yes	Yes	In progress	3	5	1.8	Data not available	100	100	Challenges getting data from school, but risks are being managed within the school
Loughborough Design School	1	1	2	2	Yes	16/03/2017	Yes	Yes	In progress	4	5	1.8	Data not available	100	100	2018 Auditing will be agreed at our next HSE meeting, which should happen in April
SSPGS	5	4	4	4	Yes	09/11/2016	Yes	Yes	In progress	6	9	3.2	Data not available	125.0	100	Cells marked in yellow means the latest data has not yet been supplied, so information ¼ out of date. Generally good engagement with the safety contacts identifying and tackling issues.
LU LDN	1	1	3	3	Yes	20/10/2016	Yes	Yes	In progress	0	3	1.1	Data not available		100	Low risk school with good engagement

Professional Services

Professional Service	No of Audits YTD	No of Audits planned for 2017	No of Safety Committee Meetings YTD	No of Safety Committee meetings planned for 2017	Date agreed for risk register workshop	Agreed date for risk register workshop	Workshop completed	Risk Register finalised	Action plan produced	Number of incidents YTD (Jan - Dec 2017)	Incident rate per 1,000 staff	No. of staff receiving training YTD	% Planned audit carried out	% Planned Safety Committees Carried Out	Notes
Academic Registry	N/A	N/A	5	5	Yes-Joint	08/02/2018	No	N/A	N/A		0.00	Data not available	N/A	100	H&S Covered as agenda item in quarterly Senior Management Meeting
HR	0	0	0	0	workshop		NO	N/A			0.00	Data not available			No separate committee but standing Agenda item in monthly Dept meeting
Campus Living	5	10	5	8	Yes	04/11/2016	Yes	Yes	In Progress		0.00	Data not available	50	62.5	
Centre for Academic Practice	N/A	N/A	N/A	N/A	Yes	10/08/2017	Yes	Yes	In Progress		0.00	Data not available	N/A	N/A	
Campus Services					Yes	08/06/2017	Yes	Yes	In Progress		0.00	Data not available			
Counselling & Disability Service	N/A	N/A	N/A	N/A	N/A	Low risk not scheduled for now	N/A	N/A	N/A		0.00	Data not available	N/A	N/A	
Development & Alumni Relations	N/A	N/A	N/A	N/A	N/A	Low risk not scheduled for now	N/A	N/A	N/A		0.00	Data not available	N/A	N/A	
Enterprise Office	N/A	N/A	N/A	N/A	Yes	21/09/2017	No	Yes			0.00	Data not available	N/A	N/A	
Facilities Management (Facilities Admin/Facilities Development/Facilities Services)					Yes	21/11/2016	Yes	Yes	In Progress		0.00	Data not available			
Finance Office	N/A	N/A	N/A	N/A	N/A	Low risk not scheduled for now	N/A	N/A	N/A		0.00	Data not available	N/A	N/A	
Doctoral College (Formerly Graduate School)	N/A	N/A	N/A	N/A	N/A	Low risk not scheduled for now	N/A	N/A	N/A		0.00	Data not available	N/A	N/A	
Imago Ltd					Yes	21/07/2016	Yes	Yes	Yes		0.00	Data not available			
IT Services	1	1	3	3 or 4	Yes	30/03/2017	Yes	Yes	In Progress		0.00	Data not available	100	100	Safety committee - 3 or 4, usually quarterly. No audit planned but annual safety checks carried out.
Library	1	1	N/A	N/A	Yes	17/08/2017	Yes	Yes	In Progress		0.00	Data not available	N/A	N/A	Don't have an H&S Committee, have H&S as a standing item on the agenda of the Management Group meetings every other week. Don't carry out formal audits but carry our RA's and H&S training as required.
SDC	2	2	3	3	Yes	07/09/2017	Yes	Yes	In Progress		0.00	Data not available	100	100	No formal audits, but sports facilities inspected weekly
Marketing & Advancement	N/A	N/A	N/A	N/A	Yes	05/12/2016	Yes	Yes	In Progress		0.00	Data not available	N/A	N/A	
Research Office	N/A	N/A	N/A	N/A	Yes	21/09/2017	Yes	Yes	In Progress		0.00	Data not available	N/A	N/A	No formal audit cab adula in place but de viel un
Student Services	2	2	3	3	Yes	15/08/2016	Yes	Yes	In Progress		0.00	Data not available	100	100.00	No formal audit schedule in place but do pick up on events and incidents, as necessary and appropriate, over the course of the year
VC's Office	N/A	N/A	N/A	N/A	N/A	Low risk not scheduled for now	N/A	N/A	N/A		0.00	Data not available	N/A	N/A	No separate committee but standing Agenda item in monthly Dept meeting. No audits completed other than DSE Assessments

Health, Safety and Environment Committee



Paper Update on the Stress and Mental Wellbeing Working Party

Title:

Origin: Neil Budworth Date: 24th January 2018

	Decision Required by Committee	None – For information
	Executive Summary	Update on the work of the Stress and Mental Well being Working Party and on the implementation of measures to support good mental well being at the University
ı	Committees/Groups previously considering item.	Stress and Mental Well being Working Party

Update on the Stress and Mental Wellbeing Working Party

The second week of December saw the launch of the Employee Assistance Programme (EAP). The employee assistance programme is a 24 hour confidential help line run by a professional third party provider that can provide support on a wide range of issues (financial, legal, relationship, health etc). The launch campaign went broadly to plan and the first two weeks saw 5 calls to the helpline. 1 call was to the Legal and Information Team, the other 4 calls were to the Counselling Helpline Team

There was also significant web site traffic in the first two weeks and the general; trends are listed in the table below

Visits to site	Number of Info downloade		Number of Guide viewings						
174	152		287						
Guide name		Number of times Guide accessed during current							
			reporting period						
Manager Support			49						
Relationships			43						
Mental Wellbeing			23						
Dealing with different personalit	ties		22						
Weight Management			17						
Caring			13						
Money and debt			12						
Work-Life Balance			12						
Your home		12							
Cardiovascular Risk		11							
Change		9							
Children		9							
Critical or Adverse Incidents		8							
Women's health		8							
Developing your skills		6							
EAP Promotion Library			6						
Consumer issues		5							
Physical Activity		5							
Sleep			5						
Alcohol		3							
Loss and Bereavement		3							
Nutrition		3							
Smoking		2							
Lifestyle and Wellbeing		1							

(Note :- As of the 18th of January 11 call had been received from staff on the main campus and one from a colleague in London)

An enhanced service has been procured for the London campus which will offer up to six face to face counselling sessions for any employee. The reason for the different service level is due to the lack of on site counselling provision on the London Campus.

Meetings were held with the EAP provider at the end of January with a view to introducing two other parts of the programme, a mangers' support line and proactive support for those who call in absent with a stress or mental health related issue.

The implementation of these elements was delayed so that we could ensure that they integrated properly with our existing provisions. We are now in a position to introduce these elements. The HR team will lead on this activity.

HR are also leading on the introduction of a new process which seeks to support colleagues who are away from work with a stress related condition. The process is structured to develop a constructive dialogue between the colleague and their manager and to help identify the areas where action is required. The process has previously worked well in Leicester City Council.

In addition Staff Development Adviser, Nadine Skinner and Assistant Director of HR, Trish Barnard will be piloting a Managing Mental Health & Disability workshop in January, this is a 3-hour workshop for Managers/Supervisors only.

Staff Development are also providing other training for managers/employees on the area of Wellbeing including; Becoming More Resilient at Work, 'Building your Confidence', 'Time Management' and 'Understanding the Impact of Stress on the Organisation.'

The new HR website includes a section on Support & Wellbeing which includes the revised stress policy, which is now called 'Mental Well-being Policy.'

On a more proactive note the Sports Development Centre have been supporting the stress and mental well being project and launched in January a low cost gym offer to all staff and their family members. This is important as physical activity is proven to help those who are suffering with stress and metal health issues.

Finally the impact of the Mental Health First Aider pilot in the School of Science has been reviewed. The pilot is considered to have been a success and, on the basis of the review, a paper has been prepared to go to Operations Committee proposing the roll out of the role to other schools and professional services.

Looking forwards into 2018 a communication programme is being developed which includes the launch of a mental well being microsite, regular news items and also a full range of activities for Mental Health Awareness week.

We are also looking at the possibility of developing an intervention based on the work of Dr Cheryl Travers from the Business School.



Paper Title: Sustainability Targets

Origin: Sustainability & Social Responsibility Sub Committee Date: 24.02.18

Decision Required by Committee	Members are asked to APPROVE targets
2. Executive Summary	The University undergoes an external audit annually by NQA as part of the requirement to maintain its accreditation to the ISO 14001 2015 standard. In the August 2017 report auditors noted a lack of quantitative KPIs for continual improvement monitoring at a strategic level. Their recommendation was that the University establish a small number of high level targets linked to the significant environmental impacts. At the last Sustainability and Social Responsibility Sub Committee (SSRSC) meeting it was agreed that these should include the following targets: Carbon Water Waste Travel
Committees/Groups previously considering item.	SSRSC have endorsed the proposed targets.



SAF18-P9

Subject:

Sustainability Targets

Origin:

Sustainability and Social Responsibility Sub Committee

Strategic objective met:

1.1 In providing high quality educational, research and workplace facilities we recognise that many of our activities have environmental impacts which are, or have the potential to be, significant. We therefore recognise the importance of protecting the environment and embedding sustainability in all we do and this is reflected in the University's Vision to 2020 which states "we will embed sustainability and social responsibility into all of our processes, operations and developments". Accordingly we are committed to implementing environmentally responsible standards and practices as part of an Environmental Management System, to mitigate and manage our impacts in a program of continual environmental improvement.

Committee Action Required:

APPROVE targets in 1.9, 1.10 and 1.11

1.2 Summary

- 1.3 The University undergoes an external audit annually by NQA as part of the requirement to maintain its accreditation to the ISO 14001 2015 standard. In the August 2017 report auditors noted a lack of quantitative KPIs for continual improvement monitoring at a strategic level. Their recommendation was that the University establish a small number of high level targets linked to the significant environmental impacts.
- **1.4** At the last SSRSC meeting it was agreed that these should include the following targets:

Carbon

Water

Waste

Travel

1.5 Rationale

1.6 Energy and Water Reduction Targets

The University Carbon Management Plan was published in 2010 and set out a target reduction in "absolute" scope 1 and 2 carbon emissions of 43% by 2020, compared to a 2005 baseline.

The absolute emissions for the 2016/17 academic year have reduced by 6.3 % compared to the base year. It is clear that the target reduction of 43% will not be achieved.

The absolute emissions take no account of a number of key factors that directly impact on energy consumption and carbon emissions across the campus including:

- Development of the estate since the base year
- Increase in number of students
- Increase in the demand for 24 hour access to facilities
- Increase in energy intensive research
- Increase in student demands to enhance the "student experience"
- Increase in the standard and use sports pitch lighting

As well as the absolute emissions, the emissions relative to student numbers are presented in the annual energy report. The absolute emissions for the 2016/17 academic year have reduced by 22.9 % compared to the base year. This has been achieved on a developing campus where facilities are being operated for longer periods.

1.7 Targets

1.8 Waste and Recycling

Targets in the past have focused on levels of recycling and overall waste. Recycling targets have been met but waste has not reduced because the target did not consider the increasing campus. New targets are being drawn up which will link waste to the number of bedrooms (target 1) but also to the campus area (target 2) with recycling levels specific to these areas.

1.9 Travel

Travel targets have been set out in the Travel Plan previously agreed so the target is taken from this and is to reduce the proportion of staff driving alone as their main mode of travel to the University from 54.5% to 47% by 2020.

1.10 Energy and Carbon Emissions

The emissions relative to student are a more meaningful metric in terms of reporting carbon emissions and performance.

A new target of a 30% reduction in emissions relative to student numbers by 2020, compared to a 2005 base line is proposed.

1.11 Water Consumption

A new target of a 15% reduction in water consumption relative to student numbers by 2020, compared to a 2005 base line is proposed.



Date: 8/1/18

Paper Title: Report from the Health, Safety and Risk Manager

Origin: Neil Budworth

1.	Specific Decision Required by Committee	For information – to note and acknowledge activities and progress since last meeting
2.	Relevance to University Strategy	Aligned with University policy
3.	Executive Summary	Update on current progress across the University
4.	Essential Background Information	Report provides details of significant progress and challenges across the University
5.	Risks, Risk Mitigation and Governance/ Accountability	Details within the document
6.	Implications for other activities	
7.	Resource and Cost	
8.	Alternative Options considered	
9.	Other Groups/Individuals consulted.	
	Future Actions, Timescales and Frequency of Review by this Committee.	
11.	Success Criteria (KPIs)	
12.	University Executive comment (required for Council papers only)	

Review of Progress of the Health and Safety Service

Prepared by Neil Budworth, Health, Safety and Risk Manager 5th January 2018

Purpose of Report

The purpose of this report is to give an update on significant events and achievements to date.

Strategic / Structural Development

Incident Reporting System

On the 1st December a new online incident reporting system was launched. Prior to the launch there had been extensive briefing and training.

The launch itself was accompanied by a publicity campaign. The communication programme worked as planned and we have seen a complete move to on line reporting and overall the response has been very good. The workflow/notifications process has meant that we are now able to identify and follow up on significant incidents more quickly and the system itself should improve data protection, confidence in the reporting system and ultimately improve the speed and accuracy of our data analysis.

Mental Health and Stress

The second week of December saw the launch of the Employee Assistance Programme. The employee assistance programme is a 24 hour confidential help line run by a professional third party provider that can provide support on a wide range of issues (financial, legal, relationship, health etc). The launch campaign went broadly to plan and the first two weeks saw 5 calls to the helpline. 1 call was to the Legal and Information Team, the other 4 calls were to the Counselling Helpline Team.

An enhanced service has been procured for the London campus which will offer up to six face to face counselling sessions for any employee. The reason for the different service level is due to the lack of on site counselling provision in London.

Meetings are being held with the provider towards the end of January to look at how we introduce and publicise two other parts of the programme, a mangers' support line and proactive support for those who call in absent with a stress or mental health related issues. The implementation of these elements has been delayed so that we can ensure that they integrate properly with our existing provisions.

In addition Staff Development Adviser, Nadine Skinner and Assistant Director of HR, Trish Barnard will be piloting a Managing Mental Health & Disability workshop in January, this is a 3-hour workshop for Managers/Supervisors only.

Staff Development are also providing other training for managers/employees on the area of Wellbeing including; Becoming More Resilient at Work, 'Building your Confidence', 'Time Management' and 'Understanding the Impact of Stress on the Organisation.'

The new HR website includes a section on Support & Wellbeing which includes the revised stress policy, which is now called 'Mental Well-being Policy.'

The Sports Development Centre have also been supporting the stress and mental well being project and launching in January a low cost gym offer to all staff and their family members. This is important as physical activity is proven to help those who are suffering with stress and metal health issues.

In addition the impact of the Mental Health First Aider pilot in the School of Science has been reviewed. The pilot is considered to have been a success and, on the basis of the review, a paper has been prepared proposing the roll out of the role to other schools and professional services.

Risk register

The risk register development sessions are now complete. At an organisational level we are now analysing the outputs of each of the sessions to understand common and organisational level risks. In addition each School or Service is being asked to develop and deliver a health and safety plan taking into account the output of the risk register.

Review of the Health, Safety and Environment Committee

The first meeting of the Health and Safety Consultative Forum was held in November. The meeting was actually a facilitated training event which allowed the membership to agree ways of working and the priorities to be considered over the next year. The first actual meeting will take place in January and the subject matter will reflect the priorities identified in the training session.

Training

We continue to support a high volume of Health and Safety training and to ensure that this remains of a good standard we continue to develop our approach to training provision. For example, manual handling trainers have been trained in a number of schools and departments and they are now developing own training for their areas of responsibility. Additionally, a new provider and delivery process has been designed for first aid training. Both the provider and process have received very positive feedback.

We have been able to secure the services of an intern for 4 weeks to evaluate the business case around E learning. During the 4 weeks project the individual will be asked to look at the overall costs of E learning currently within the Health and Safety Service; the likely future demand; whether it would be more effective to move some face to face training on line and finally to determine if there is a business case for developing more material internally either as a stand alone department of in conjunction with Staff Development.

Facilities Related Issues

There have been a series of events aimed at improving the safety culture of the Facilitates Services team. A senior leadership workshop for the members of the Facilities, Infrastructure Group was delivered by the external consultancy Setters on 31st October which challenged the group to examine the way they think and behave in relation to safety and health.

This was followed in November with a series drama based challenge sessions for all staff.

On the basis of these sessions the Facilities Services leadership has agreed to a renewed focus on sensible risk assessments; the introduction of morning, safety related briefing sessions and the introduction of a dynamic risk assessment process.

Fire and Explosion

Consultants have been identified to support the University withy more complex explosive atmosphere assessments. The consultants have been recommended following an assessment of competence and cost.

Laser Safety

At the request of Public Health England an article has been provided on the impact of the new sentencing guidelines on laser safety for their publication Laser Safety Matters.

Radiation Safety

A series of anonymous accusations regarding poor radiological safety practices were made to Charnwood Borough Council, Nicky Morgan, and the regional officers of Unite and Unison.

The allegations have been thoroughly investigated and a special meeting of the Radiological Protection Sub Committee reviewed the allegations and the evidence relating to the allegations and determined that there was no basis of fact in any of the accusations and that the accusations were vexatious.

The accusations did however result in formal inspection by the Health and Safety Executive and the Environment Agency. Both agencies examined in detail the arrangements and physical standards on site. Both agencies were very happy with the standards and referred to some of the processes we have in place as representing the gold standard in radiological protection in the higher education sector. No further action is required by the University.

During a routine check it was discovered that an academic was running an experiment involving radiation which did not have a current risk assessment and which did not follow the principle of achieving as low as reasonably practicable exposure. This was formally investigated and resulted in a member of academic staff being disciplined.

Plans have been developed for the decommissioning of the Graham Oldham building. Staff have been appointed and the decommissioning should start in January 2018.

Report on significant Incidents

During December we suffered an Asbestos near miss. The installation of blinds had been commissioned an operational department and the contractors concerned were not directed to, or did not consult the asbestos register. In this case no asbestos was released, but there was asbestos containing material in the close vicinity. This incident is subject to an internal investigation.

Approximately two tons of white asbestos was fly tipped on University land. Emergency control and disposal arrangements were put in place and the material was secured and disposed of safely.

Whilst guillotining a steel plate in the Wolfson workshop a member of CREST staff received a severe cut to their wrist. It appears that the individual slipped and the sharp edge of the steel rode up above the cut proof gloves into the individual's wrist. The individual was detained in hospital for a number of days. This has been reported to the HSE as a RIDDOR incident and will be considered by an Incident Review Panel in January.

There was a crowd collapse at the Loughborough Student Union resulting in 4 people being taken to hospital. The collapse occurred whilst people were queueing for first Friday Night Disco of the year (one of the biggest evets of the year). A joint investigation was conducted by LSU and the University Safety and Security team and actions were put in place within a week to prevent a reoccurrence.

A case of Byssinosis (a lung disease linked to exposure to cotton dust) has been identified in the School of the Arts, English and Drama. Fibre levels in the area concerned have been measured and are below the threshold of detection, so if the diagnosis is confirmed it is likely to be the result of historical exposure. The case was investigated and reported to the Health and Safety Executive.

A near miss occurred in Wolfson when, during recent winds, a heavy window fell into an office area. All of the windows in the Wolfson building have now been checked and corrective action lies with Facilities Services.



Paper Title: Sustainability and Environmental Report

Origin: Nik Hunt, Environmental Manager Date: 24.02.18

1.	Decision Required by Committee	Members are asked to RECEIVE paper
2.	Executive Summary	Update on: University Environmental Management System Compliance Non-Conformance Environmental Incidents
3.	Committees/Groups previously considering item.	HSE Statutory Compliance Sub Committee Sustainability and Social Responsibility Sub Committee



Environmental Management

Subject: HSE Committee Update on Environmental Sustainability

Origin: Sustainability and Environmental Managers

Purpose of the report

To provide a report on the strategic delivery of environmental sustainability.

Executive Summary: Please see cover sheet.

1. Environmental Management System (EMS) ISO14001 Update

There have been no major works on the EMS since the achievement of the ISO14001:2015 standard in September although we have been progressing the actions raised at the audit.

There are outstanding actions to review:

- Communication
- Operational Planning and Control
 These will need to be picked up in the next 6 weeks

Before the next meeting in May we are due to:

- Review Emergency preparedness and response no major changes expected (Jan)
- Undertake a system audit this is normally done as a peer audit by NTU (Feb)
- Review the environmental objectives and planning to achieve them (Mar)
- Undertake internal audits to establish operational compliance (Mar) and subsequently undertake a legal compliance evaluation. (Apr)
- Review risks and opportunities (Apr)
- Identify areas for improvement (Apr)

At the May meeting we will then need to undertake the annual Management Review.

2. Environmental Non-Conformances within the EMS.

There have been no non-conformances logged since the last report

3. Environmental incidents

There have been a few minor environmental near misses on campus as usual but nothing of significance. However since Christmas it has come to light that there is a significant oil or fuel residue in the basement of the Frederick street building. The clean-up of this is being investigated but as Environmental Manager I am concerned that there is the potential, through the flooding and natural drainage of this basement, that the surrounding strata may have become contaminated. This is currently being investigated and the outcome of tests of the pollutant are awaited but there are no volatile hydrocarbon emissions being given off.

4. Legislation

There is no new legislation of note to raise with the committee.

5. Key Performance Indicators

Future reports will include progress against the key targets detailed on the accompanying paper.



Paper Title: University Fire Officers report for the period 01/09/17 to 31/12/17

Origin: Mr R M Harrison, University Fire Officer

Date:11/1/2018

Decision Required by Committee	None. Report to be received and noted
2. Executive Summary	Loughborough University update following Grenfell. Update on the management of fire alarm systems isolations guidance document. Brief on Annual controlled fire evacuations.
Committees/Groups previously considering item.	None



1. Loughborough University actions following the Grenfell Tower Tragedy

Since the tragic events at Grenfell Tower we have received a number of visits from Leicestershire Fire and Rescue Services to undertake an assessment of the physical standards and precautions on site. The latest visit involved and inspection the David Collett student accommodation buildings which passed without incident. The Facilities Management team has initiated an inspection programme with the aim of fully understanding the cladding construction on some current academic buildings. These buildings are not considered to be a risk, but the work is being undertaken to allow us to accurately assess the fire risk and so that we can respond to any recommendations coming from the investigation and inquiry.

The interim report on the future of fire legislation has been issued by Dame Judith Hackitt. Dame Judith has identified a raft of failings in the design and application of the current system and has stated that the current system is not fit for purpose. There will be significant changes over the next year or so

2. Fire alarm system isolations in University Buildings

A formal system to ensure the control of fire alarm isolations has been implemented. Permit to work books are currently being printed.

3. Annual controlled fire evacuation

The annual controlled fire evacuation exercises were carried out during November 2017.

Overall the evacuations were extremely good and all occupants within the buildings at the time of the test responded to the alarm, evacuated the buildings and promptly assembled at the designated assembly points. All occupants were thanked for their prompt response.

All Fire Marshals present at the time of the controlled evacuation performed their duties well, which involved them sweeping their designated areas of the building and reporting to the fire assembly point to police the persons assembled.

SDC managed buildings controlled fire evacuations are planned to take place in June 2018, this has been agreed to ensure that occupants in SDC buildings wearing few clothes, will be at lower risk of exposure to the effects of inclement weather.

4. Fire Standards in Laboratory's S and W building

There has been ongoing discussion regarding the standard of fire protection that should be designed into the laboratories in S and W building. We now believe that all relevant risks have been identified and appropriate standards have been recommended. A guidance document has been produced to aid schools occupying the none fire rated laboratories to explain the restrictions which are in place, specifically around the use of compressed flammable gases.

5. Update on actions taken to reduce the number of cooking related false fire alarm activations in student Halls.

Over the summer a number of changes were made to Telford Hall to seek to reduce the number of cooking related false alarms. Specifically, door screamers fitted to communal kitchen doors to help prevent them from being

propped open. A comparison between Sept 2016 - Jan 2017 and Sept 2017 – Jan 2018 showed the number of alarms dropping form 14, to just 3.

On the basis of these figure we believe that the provision of door screamers has been effective. We will continue to monitor these reports, but unless there is a sudden change in the trend we will be recommending a wider deployment of this technology in the next academic year.

6. Fire Alarm Activations and Fire & Rescue Service call-outs statistics January 2017 - April 2017.

	September 2017	October 2017	November 2017	December 2017	Total
Number of	27 Residential	45 Residential	42 Residential	42 Residential	157
Activations	0 Dining Halls	1 Dining Halls	1 Dining Halls	3 Dining Halls	5
	16 LU Building	20 LU Building	9 LU Building	24 LU Building	69
Activations involving F&RS	None	None	None	None	0
Genuine Fires	None	None	None	None	0

Loughborough University Buildings (Academic & None-Academic):

4 Burleigh Court	3 Bridgeman	2 Boiler house
6 Chemistry	8 Edward Barnsley	2 EHB
3 Graham Dilley	2 Haslegrave	1 Holywell Building
1 imago sales office	2 Link Hotel	1 LU Stadium
1 Medical Cent	1 Michael Pearson East	3 Performance Cent
5 S Building	2 Sir David Davies	1 Sir Dennis Rooke
2 Sir Richard Morris	7 Stewart Mason	1 Wavy Top
5 Unsteady Fluids	5 Wolfson	1 3D Building

Dining Halls:

3 Cayley/Rutherford D/Hall	0 Faraday/Royce D/Hall	David Collett D/Hall
2 Village Restaurant D/Hall	0 William Morris D/Hall	0 Towers D/Hall

Halls of Residence (University Managed)

7 Butler Court	17 Cayley	8 David Collett	42 Falk / Egg
23 Faraday	16 Royce	9 Rutherford	9 Telford
5 Towers	0 University Lodge	19 UPP Blocks	1 Whitworth

Halls of Residence (Not managed by the University) Unite:

Note regarding Unite premises

During this reporting period these are the alarm activations with a known cause/reason

Harry French (13)

Holt (4)

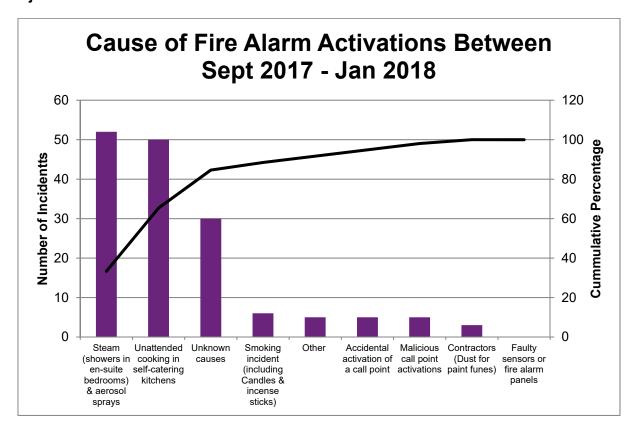
Waterways (4)

William Morris (10)

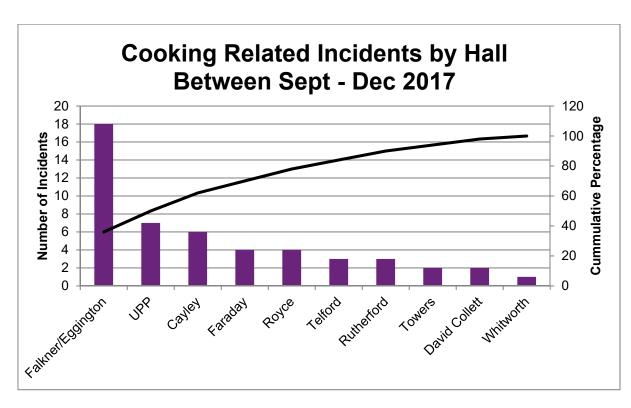
There were 10 instances of fire alarms that didn't have a known cause.

(All above information gathered from period (1/09/17 –31/12/17) Mr R M Harrison –University Health & Safety Service

The Major Causes of Fire Alarm Activations in LU Halls of Residence:



Cooking Related Incidents in LU Halls of Residence:





Health, Safety & Environment Consultative Forum HSECF18-M01

Minutes of the Meeting held on Wednesday 17th January 2018

Present: Alec Edworthy, David Howell, Jane Turner, Jo Shields, Jude Hoy, Julie Turner, , Kevin Walmsley, Neil Budworth, Rachel Jermyn, Rod Harrison, Sean Creedon, Spencer Aryeetey Brian Reed Chris Rielly

Apologies: Graham Moody, Hugh Weaver, James Stapleton, Judy Billington, Matthew Inglis, Occupational Health, Paul Walker, Trish Barnard, Siobhan OReilly,

Sandy Edwards Sandra Roberts-Kellman Occupational Health

In attendance: Karen Daniels (minute taker)

MINUTES

Item	Action by
Introduction and Welcome	NB
Report from Health, Safety and Risk Manager Update was given	NB
Link attached. Health and Safety Manager's Report.d	
Health and Safety Annual Report Update was given Link attached.	
	Introduction and Welcome Report from Health, Safety and Risk Manager Update was given Link attached. Health and Safety Manager's Report.d Health and Safety Annual Report Update was given Link attached.

18/04	Progress of the Risk Registers - update	JDS
	Please see below details of the Risk Register updates:	
	The findings of each School and Professional Services H&S risk register have been combined, and the top 10 risks identified by frequency are listed below:	
	 Equipment / material / substance use in laboratories by staff and students Events, ranging from open days to very small 	
	 events H&S Competence / culture / knowledge and understanding of procedures Lone working and out of hours working 	
	 Personal safety Workload pressures caused by resourcing levels / organisational change 	
	 Provision of University facilities / equipment / assets that are used by 3rd parties Maintenance of assets Travel Manual handling 	
	Loan working will be an item of work.	
18/05	<u>Chemical Safety – update</u>	JMT
	New training and new material now available. This will be communicated through the normal channels.	
18/06	The Interface between Facilities Services and Schools and Departments – who does what	DH
	Presentation is attached along with of list of DAPS (Duty Authorised Persons) and	
	Consultative Forum Compliance Facilities Services	
	Jan 18.pptx Governance.xlsx Nov 2017 Rev.5.vsd	
18/07	Progress update Stress and Mental Wellbeing	NB
	Update was given.	

Developing a Mental Wellbeing S ⁻	
Campus Cycle Safety Update was given, ongoing actions linked to campus infrastructure and awareness.	JS
Any Other Business	ALL
Nothing to report	
Date of Next Meeting 23 May 19 September	
	Campus Cycle Safety Update was given, ongoing actions linked to campus infrastructure and awareness. Any Other Business Nothing to report Date of Next Meeting 23 May

Health, Safety and Environment Statutory Compliance Sub-Committee



Minutes HSSC18-M1

Minutes of the meeting held on 10 January 2018

Attendance

Present:

Andrew Burgess (Chair), Neil Budworth, David Howell, Chris Riley, Robert Schmidt III, Steve Warren

In attendance:

Tanya Osborne (secretary), Jim Brooks, James Stapleton, Paul Walker

Apologies received from:

Donna Bentley, Nik Hunt

Business of the Agenda

No items were unstarred.

18/1 Minutes

The Committee RECEIVED the minutes of the previous meeting

HSSC17-M3

1.1 The minutes of the meeting held on 12 September 2017 were CONFIRMED.

18/2 Matters arising from the Minutes

Governance Chart (minute 17/28.6 refers)

HSSC17-P21R

2.1 The Committee welcomed the refreshed look for the governance chart, and felt that it was much clearer than the previous iteration. It was noted that in the short time between Committees some of the information had become out of date, and the Committee recognised that this would need to be a live document.

SECTION A – Items for Discussion

18/3 Upate on Duty Authorised Person (DAP) Meetings

HSSC18-P1

3.1 This item is an update on previous committee proceedings, minute HSSC17/28.1 refers.

- 3.2 The Committee heard that DAPs were now in place for the 12 identified areas, and they were now working together to form a strategy for identifying responsible persons in Schools. It was noted that Schools have some concern over the possible additional workload, and that in response it would be necessary to ensure clarity around the work required of responsible persons.
- 3.3 The Committee briefly discussed the incoming technologies that would be used for asset management, and that would be used to supply a compliance dashboard, and some time was spent clarifying the roles of these two new softwares.
- 3.4 The Committee returned to previous discussions around the difference between compliance and assurance (HSSC16/4.5 refers). It was clarified that the maturity matrix and the work of the DAPs on this matrix was set to provide *assurance* that the correct policies and governance structures are in place, in the form of *maturity*. Additional information supplied by the new compliance dashboard and through internal and external audit would give information about *compliance* with these procedures.
- 3.5 The Committee agreed that it would be helpful to develop a visual which shows the progress made both on assurance and compliance.

18/4 Progress against PWC Audit

HSSC18-P2

- 4.1 The Committee noted that compliance areas had been categorised into high and low risk by use of either allocating them a DAP or managing them under Safe Operating Procedures (SOP). Areas with DAPs were considered high risk.
- 4.2 The Committee discussed how best to report compliance information back to the parent Committee, Health Safety and Environment Committee, and what information would also need to be reported to Council.
- 4.3 Following on from the discussion under 18/3.4, the committee recognised the importance of stressing that areas where assurance about governance were less certain were not necessarily areas where the University was not compliant. It was suggested further to in 18/3.5 that at a high level the information might be displayed as two variables in each area, one showing maturity and the other compliance, which is supplemented by a brief overview of potential gaps and recent successes.
 - i) <u>Action:</u> PW to send to secretary for circulation an example of already extant compliance weighted scorecards
 - ii) Action: PW and JS to put together a visual showing the maturity assurance and compliance progress
- 4.4 The Committee noted progress on audit cycles, and were pleased to note that sufficient progress had been made in a number of areas to take the auditing internally. It was suggested that with current resource an appropriate cycle length for audit timelines as 18 months.
- 4.5 The Committee noted that e-learning was being explored as a way of extending staff capability.

18/5 Asset information update

HSSC18-P3

- 5.1 It was noted that there was some variance in the way that Schools were capturing asset information, and that some Schools had yet to respond to the information request. Feedback from the Committee suggested that the timing of the request clashed with some business-critical deadlines for Schools, and that it would be worth re-sending the request.
 - i) Action: DH to remind Schools to send a copy of asset information and give details of a responsible person.

18/6 School Compliance Questionnaires

HSSC18-P4 HSSC18-P5 HSSC18-P6

The Committee received an update on the new format for questionnaires and the agreed cycles. It was noted that for some DAP areas the questionnaires were being sent to a broader set of people. It was noted that the format had been successful in revealing areas where the University had previously been unaware of equipment or activity that fell in the remit of particular compliance areas. The Committee noted that the original intention was not to re-send questionnaires where the School had indicated no activity in that area (minute HSS17/17.4 refers), but felt that it was appropriate to continue to re-send questionnaires in case statuses change.

18/7 High Voltage and Low Voltage

The committee received an oral report from the DAP for High and Low Voltage Electricity outlining the key issues with this area of compliance with reference to the maturity matrix

- 7.1 The Committee heard about the development of the former keyroom into a suite for High Voltage co-ordination.
- 7.2 The Committee discussed procedures behind ensuring that O&M (operation and maintenance) manuals are properly updated by contractors. The DAP for High and Low Voltage Electricity identified that incorrect O&M records were an area of high risk that may affect other DAP areas. The Committee heard that the process for updating O&M manuals frequently took longer than 6 months.
- 7.3 The Committee also discussed areas where there was ambiguity for responsibility within the electricity networks, particularly where infrastructure was shared by external organisations or tenants on university property. It was noted that some meetings had already been set up with Loughborough College to discuss and clarify maintenance issues, and it was felt that some stakeholders from other enterprises ought to be invited to attend the groups discussing High and Low Voltage Electricity.
- 7.4 The Committee discussed the permit to work system, and noted that investigation was underway in converting to an electronic system for issuing and tracking permits to work.
- 7.5 The Committee were pleased to hear that there had been external training for the persons involved in High and Low Voltage, and that competencies have been checked.

18/8 Schedule for Future Business

8.1 The Committee agreed that it would be optimal to invite three DAP representatives to each meeting going forward, starting with the DAPs for Gas Installation, Local Exhaust Ventilation, and Food Hygene.

SECTION B – Starred Items for Approval

There were no starred items for approval

SECTION C – Starred Items for Information

There were no starred items for information

18/9 Any Other Business

Potential Breaches

9.1 It was noted that a potential breach had been identified in gas servicing for kitchens, whereby the contractor being used was not supplying information in a timely manner. This had been escalated, and action had been taken involving a small number of other universities located in close geographical proximity.

Date of Next Meeting

Wednesday 2nd May 10:00 Pearce Committee Room

Author – Tanya Osborne Date – 11 January 2018

Health Safety and Environment Statutory Compliance Sub Committee

Composition, Membership and Terms of Reference

Composition and Membership

Director of Infrastructure & Commercial Services (Chair)

Health, Safety and Risk Manager

Neil Budworth

Head of Engineering

David Howell

Dean (to be nominated by HSEC) Professor Chris Rielly

Operations Manager (nominated by HSEC)

Steve Warren

Environmental Manager

Nik Hunt

School Technical Services Manager Dr Donna Bentley

Academic representative with expertise in this area

Dr Robert Schmidt III

In attendance:

University Compliance Engineer Paul Walker

Deputy Health, Safety and Risk Manager James Stapleton

Secretary Tanya Osborne

Other Duty Authorised Persons, Heads of Professional Services Management Teams, or other specialist advisors by invitation

Terms of Reference

- To advise Health, Safety and Environment Committee on compliance with statutory health and safety across the University relating to facilities in line with the University Health and Safety policy.
- Monitor adherence to governance structure for health and safety management
- Ensure an appropriate audit programme of statutory activities exists
- Governance of compliance in relation to topics listed below to a schedule agreed by the committee:

Asbestos

2. Water hygiene

3. Local Exhaust Ventilation Systems (LEVs)

4. Noise

5. Hand arm Vibration

6. Lifting equipment

7. Pressure systems

8. Electrical installation

9. Gas

10. Fire safety

- 11. Working at height
- 12. Environment (inc Energy)

13. DSEAR

14. F Gas

15. Food Hygiene

16. Confined Spaces

17. Excavations

17. Excavations

18. Permits to Work

19. Personal Protective Equipment20. Sports Playground Equipment

- Meet three times per annum in advance of HSEC; 2017-18 schedule
 - o 11th September, in preparation for HSEC 27th September 2017
 - o 10th January, in preparation for HSEC 7th February 2018
 - o 2nd May, in preparation for HSEC 6th June 2018



Sustainability & Social Responsibility Sub Committee (SSRSC)

SSRSC18 - M1

Minutes of Meeting

These are the minutes of the meeting held on Tuesday 16th January 2.00 – 4.00pm in the Jennings Council Chamber, Hazlerigg Building

★ Starred items are for information and are not discussed.

		Item	Action
18.1.1.	Present:		
	Richard Taylor (RT)	Nicholas Clifford (NC)	
	Jo Shields (JS)	Andrew Burgess (ABu)	
	Nik Hunt (NH)	Tracey Bhamra (TB)	
	Apologies:	Invited:	
	Alison Barlow (AB)		
	George Etherington (GE)		
	Jon Walker (JW)		
18.1.2.	Minutes from previous meeting		
	Correct Record.		
	NH still has some actions on image	go and tenants	
	JS still has some actions but is cl	ear on these.	
18.1.3.	Actions not appearing elsewhe	re on the agenda	
	None	-	

SSRSC will need to decide and support items reported at Senate and the various Committees. Meetings should therefore note business that requires reporting and into which committee and actioned accordingly.

Area of Discussion:	Action
Environmental Management System targets SSRSC18.A1 P01 Targets as detailed in the paper	JS
 Waste Targets: 4 revised targets in the process of being created: Overall waste per bedspace 210Kg and onsite Recycling per bedspace 60Kg. Overall waste per GIA and Recycling per GIA – these figures are still being calculated as EMR data does not include commercial space and waste includes commercial space. RAG Dashboard to monitor specific projects / behaviour change to see if we are happy especially in key areas such as plastics, food waste, cups, radiation waste, hazardous waste, printing, water fountains. Identify behaviours which need to change to reflect Sustainability 	
	 Environmental Management System targets SSRSC18.A1 P01 Targets as detailed in the paper Waste Targets: 4 revised targets in the process of being created: Overall waste per bedspace 210Kg and onsite Recycling per bedspace 60Kg. Overall waste per GIA and Recycling per GIA – these figures are still being calculated as EMR data does not include commercial space and waste includes commercial space. RAG Dashboard to monitor specific projects / behaviour change to see if we are happy especially in key areas such as plastics, food waste, cups, radiation waste, hazardous waste, printing, water fountains.

	NH and JS to develop.	NH/JS
18.1.5.	Environmental activism - Verbal	RT
	Activism by P&P in recent months, causing problems by their actions	
	in respect of promoting divestment from fossil fuels.	
	Other universities have divested.	
	There have been instances of greater activism in other institutions	
	LU only has a small amount invested in fossil fuels and sustainability	
	do feel we should talk about exploring our options for divesting because we want to.	
	Comment from AB:	
	James Jones does not feel it's a big deal and not worthy of action if it	
	costs which effects the student experience. Andy Stephens (AS) comment is only minor return and we have little	
	buying power and there would be a cost.	
	Are we bowing to pressure if we action this?	
	On balance we might not invest and more discussion needs to be	
	had. Counter arguments – don't view this as legitimate	
	Action for RT to convey discussion to AS so he can talk to the	RT
	treasurer.	
18.1.6	Reuse: WARPit – Verbal	NH
10.1.0	A paper was presented at last years May meeting – it was advised	
	that Procurement should take the lead	
	A meeting was subsequently held with procurement and they felt this	
	was not something they could develop as:	
	They don't have the resource to progress this	
	 Most items wouldn't go through the procurement office so there would be little opportunity to encourage reuse 	
	They would however be happy to flag it as a policy /	
	procedural requirement and work with us to promote it.	
	The use of a system such as WARPit is still required to increase our	
	reuse and to make it work needs:	
	Support through a policy from procurement Promotion and training so ordination by Sustainability / the	
	 Promotion and training co-ordination by Sustainability / the service provider 	
	Involvement from Domestic Services for transportation	
	Ownership by the Schools and Professional Service	
	Departments once trained.	
	• Funding	
	The committee is asked to approve this being progressed with WARPit through the Sustainability Team.	
		1

	RT to take WARPit issue to procurement again.	RT
	Compliance	
18.1.7	To receive an update on ISO 14001:2015 - Verbal	NH
	There have been no major works on the EMS since the achievement of the ISO14001:2015 standard in September although we have been progressing the actions raised at the audit.	
	There are outstanding actions to review: Communication	
	Operational Planning and Control These will need to be picked up in the next 6 weeks	
	Before the next meeting in May we are due to: Review Emergency preparedness and response – no major changes expected (Jan) Undertake a system audit – this is normally done as a peer	
	 audit by NTU (Feb) Review the environmental objectives and planning to achieve them (Mar) 	
	 Undertake internal audits to establish operational compliance (Mar) and subsequently undertake a legal compliance evaluation. (Apr) Review risks and opportunities (Apr) 	
	Identify areas for improvement (Apr) At the May meeting we will then need to undertake the annual Management Review.	
	There have been a few minor environmental near misses on campus as usual but nothing of significance. However since Christmas it has come to light that there is a significant oil or fuel residue in the basement of the Frederick street building. The clean-up of this is being investigated but as Environmental Manager I am concerned that there is the potential, through the flooding and natural drainage of this basement, that the surrounding strata may have become contaminated. It is therefore my recommendation that a specialist assessor is brought in to determine whether this is the case but funding would be required for this.	
	NH to pick up with Andrew on Frederick Street, need to clean up and review further action required in terms of potential for land contamination.	NH / AB
18.1.8	To receive an update on the Travel Plan - Verbal	JS
	In negotiation with LCC / Access car parking charges for SEP. Different charging structure required. Concerns regarding overspill from tenants to main campus.	
	JS also needs to talk to Mark Davies over British Athletics over similar (but smaller scale) issue over tenant parking.	
	LUSEP – could we create a commercial case for a multi-storey car	

	park for visitors. Specialist needs to be brought in to review.	
	Strategic items	
18.1.9	Terms of Reference SSRSC18.A1 P02 Approved	JS
18.1.10	Students Union strategic direction - verbal	GE
	LSU has no paper for its sustainable strategic direction currently	
18.1.11	Social responsibility strategic direction SSRSC18.A1 P03	JW
	Paper encourages us to keep thinking about the area of SR but that we are not making the most of this for the University! It is however a matter of priorities and choices and we can't do everything.	
	The action remains for JW to gather a group to discuss this and report back.	JM
	Key Drivers	
18.1.12	Sustainable Development Goals SSRSC18.A1 P04 / Presentation	JS
	Action to map SDG to Sustainability Action Plan.	
	17 core goals with indicators behind them. Governments should be working to these and aiming to deliver by 2030.	
	Accord was created by the EAUC and this is a commitment that an institution will work towards them.	
	Benefit Demonstrate how our actions map Work with our peers to make a commitment	
	Mapping exercise would tell us whether there is an alignment.	
18.1.13	Any Other Business	
	None	
18.1.14.	Date of Next Meeting – 14 th May	