Health, Safety and Environment Committee



SAF25-M2

Minutes of the Health, Safety and Environment Committee held on Wednesday 14th May 2025

Attendance

Members:

Sola Afolabi, Elliott Brown, Neil Budworth, Joni Carter-Hendrickson (ab), Alec Edworthy, Graham Howard, Liz Monk, Graham Moody, Indie Nagra, Valerie Pinfield, David Roomes, Jagjit Samra, Alex Stacey-Midgley, Luke Stott, Richard Taylor (Chair), Rachel Thomson (ab).

In attendance:

M Ashby (Secretary), Irvin Hendrickson in place of Joni Carter-Hendrickson, Malcolm Cook and Adam Crawford for M25/26, Lauren Sherar and Ruth Casey for M25/27, Sarah van-Zoelen for M25/28, Julie Turner for M25/33, Catherine Smethurst for M24/34.

Apologies:

Joni Carter-Hendrickson, Rachel Thomson.

25/24 Minutes

SAF25-M1

The minutes of the meeting held on 5th February were APPROVED.

25/25 Matters Arising from Previous Meetings

SAF25-P25

- 25.1 Actions arising from previous minutes were NOTED and their current status confirmed.
- 25.2 UNISON had raised a number of enquiries prior to the meeting. There had been insufficient time to investigate them in advance of the meeting. It was agreed that the Director of HSE should meet with the UNISON representative to discuss the issues and a note lodged with the minutes of that meeting. **ACTION: Director of HSW**
- 25.3 Arising from M24/37.3 *HSE Update: LSU* Quotes for repair work on the roof of the LSU Building were to be submitted to the Long-Term Maintenance Sub-Committee. It was anticipated that the work would be completed in the Summer or in 2026.
- 25.4 Arising from M25/2.3 *Critical Risk Strategy Control and Compliance: Stress and Mental Wellbeing:* Members noted an update in the paper from the Director of Estates and FM on members of staff holding more than one role within the University or a role outside the University in addition to their University role. They were informed that it was not always possible to identify staff who held more than one University role as employee records were held on more than one system. The working hours of a small number of staff in one area of

Estates and FM who were known to hold more than one University role were activity monitored to ensure that they were not excessive. However, whilst other individuals were known to regularly work excessive hours for personal reasons, consistent monitoring remained difficult.

- 25.5 Members noted that there were three different scenarios which might result in staff working excessive hours: staff holding a role within the University and another outside it, staff holding more than one role within the University and where the total number of hours exceeded a full-time contract, and staff who held a zero-hours contract. The Director of HSW would meet with the UNISON representative to investigate health and safety risks associated with the third scenario and would report back under Matters Arising at the October meeting. **ACTION: Director of HSW**
- 25.6 The Unison representative informed members that it may be possible for managers in Estates and FM to identify situations where staff were working back-to-back shifts on consecutive days due to flags within the TMS system. The Director of HSW was asked to investigate. **ACTION: Director of HSW**

Secretary's Note on M25.2: The Director of HSW and the UNISON representative have discussed the issues. The UNISON representative was content with the actions taken regarding the Caley Hall ceiling collapse and was reassured that the University was using DVLA standards for health surveillance. In terms of the working time query, detailed information was provided by HR colleagues. The Director of HSW is to follow up with HR colleagues a question raised by the UNISON representative.

As the UNISON representative on HSE Committee is not a member of the Catering, Domestic and Residential Services (CDRS) Health and Safety Committee, a member of the Health and Safety Service will offer to meet with colleagues in CDRS ahead of its Health and Safety Committee meetings so that issues can be raised at CDRS's meetings, rather than being escalated to the University's HSE Committee.

The Director of HSW has also agreed to meet with UNISON representatives two to three weeks ahead of each University HSE Committee meeting to allow sufficient time to investigate and report on any issues that have been identified by UNISON.

25/26 Health, Safety and Environment Update: School of Architecture, Building and Civil Engineering

SAF25-P26

- 26.1 The Committee RECEIVED a health, safety and environment update from the Dean and Head of Operations for the School of Architecture, Building and Civil Engineering.
- 26.2 The School was proactive in monitoring staff wellbeing. Its Wellbeing Champion was accessed by staff on a regular basis and signposted to relevant help. The Wellbeing Champion provided feedback to the Dean and this information was used to informed decision making. The School's Senior Management Team also reviewed wellbeing sections of PDR statements, and this had led to issues being followed up with individual members of staff.
- 28.3 The following were noted in particular:
 - (i) Additional safety measures had been introduced for the School's computer-controlled, 3D printers to prevent entry of the surrounding cage when in use.
 - (ii) The School carried out regular inspections of studio areas to check for use of unauthorised electrical equipment.
 - (iii) The windows of the Frank Gibb Building were checked regularly for cracked panes.
- 28.4 Two scalpel-related student injuries had been categorised as RIDDOR incidents as the individuals had sought treatment at Loughborough Hospital's Urgent Treatment Centre which was close the University campus. The School's students received training in the use of scalpels. David Roomes would share advice on the use of ceramic knives with the School.

ACTION: D Roomes

25/27 Health, Safety and Environment Update: School of Sport, Exercise and Health Sciences

SAF25-P27

- 27.1 The Committee RECEIVED a health, safety and environment update from the Dean and Head of Operations for the School of Sport, Exercise and Health Sciences.
- 27.2 There had been a step change in relation to HTA-related practices within the School, with heightened awareness of requirements to ensure compliance. The School regularly reviewed numbers of HTA samples to ensure that it did not exceed storage capacity.
- 27.3 The School owned a number of items of equipment which were no longer supported by manufacturers. However, staff only made use of them if deemed safe to do so.
- 27.4 Dynamic working had had an impact upon the availability of academic staff to carry out some non-teaching responsibilities on campus. Care needed to be taken to ensure that an individual's engagement in dynamic working did not result in a greater workload for others.
- 27.5 Members were informed of temperature regulation issues experienced in the Matthew Arnold Building. The School was encouraged to draw the issues to the attention of the Long-Term Maintenance Sub-Committee if it wished to continue to use the building long term. **ACTION: SSEHS Dean, SSEHS Head of Operations**

25/28 Employee Stress and Mental Health

SAF25-P28

- 28.1 The Committee RECEIVED an update on employee stress and mental health within the University from the Occupational Health and Wellness (OHW) Manager.
- 28.2 The update included a number of recommendations: to continue to address the narrative around workloads and prioritisation, to provide greater data analysis to aid managers to identify areas of concern, to continue to provide leadership training for conversations with staff and encouragement of communication around the support available for employees with mental health concerns. It also recommended ensuring that the Staff Health and Wellbeing Steering Group provided annual feedback to the Committee.
- 28.3 Members were informed that there was sometimes confusion over who was responsible for ensuring that HR policies were followed. There was often an expectation that HR was responsible for ensuring compliance with HR policies when in fact this was normally the responsibility of individuals or managers within Schools and Professional Services.
- 28.4 The OHW Service provided Schools and Professional Services with stress and mental health reports for referred members of staff, and HR provided insight reports on areas of the University when required. Again, it was noted that it was the responsibility of Schools and Professional Services to act upon these reports.
- 28.5 Take up of the Employee Assistance Programme was significantly higher than that at many other universities. This was said to be due to greater awareness of the programme.
- 28.6 Recent external reports had indicated that, whilst mental health first aider schemes increased awareness of mental health issues, they did little to reduce instances of stress and related issues. This had been recognised by the OHW Service and had resulted in its mental health first aider scheme being replaced by the Wellbeing Champion scheme.
- 28.7 A question was posed about the potential for staff mental health issues to impact upon students and for issues experienced by students to impact upon staff. This had been recognised as a possibility due to the rapid growth in reported mental health issues in the cohorts who would soon be joining the University. Proactive approaches such as the Science of Happiness Courses run in Yale and Bristol were being considered.

25/29 Proposed Changes to the Operation of HSE Committee

SAF25-P29

- 29.1 The Committee considered a plan for it to transition to a new way of operating. It approved the plan subject to changes to the timing of the introduction of some elements.
- 29.2 It was agreed that the Health and Safety Service should conduct a pilot with a School and a Professional Service over the Summer in order to develop exemplars to ensure that the proposed steps would not place an excessive burden upon Schools and Professional Services. If deemed successful, the new approach would be rolled out more broadly across the University in October or November. The Director of HSW would identify a School and Professional Service for the pilot, prioritising those which were scheduled to provide an update to HSE Committee at forthcoming meetings. **ACTION:** Director of HSW

25/30 Director of Health, Safety & Wellbeing Update

SAF25-P30

- 30.1 Members RECEIVED a consolidated report from the Director of HSW on issues and actions relating to health, safety and wellbeing.
- 30.2 The following were noted in particular:
 - (i) The Health and Safety Service was monitoring two high-profile corporate manslaughter cases that were being brought against other organisations. A training session was to be delivered to the University Leadership Group by the law firm Eversheds.
 - (ii) A working group was to be established to consider attendance numbers and crowd behaviour following the collapse of perimeter fencing at the BUCS Men's Hockey Championship. The working group was being established as there appeared to be a change in the volume of spectators and their behaviour.
 - (iii) The water system in Towers continued to be closely monitored.
- 30.3 Two recent ceiling collapses in Royce Hall had been investigated and found to be due to leaks caused by degradation of waste pipes in shower units on the floor above. An urgent survey was being carried out to understand the condition of couplings in the shower units. The Director of HSW would check that guidance had been issued to Domestic Services staff so that they could continue to monitor the rooms. **ACTION: Director of HSW**
- 30.4 The Director of Estates and FM was to recommend to SPaRC that the University adopt the Safezone system for mass notification of staff, students and visitors in the event of a serious incident and for lone worker management. Discussions were underway regarding information governance surrounding the system. Estates and FM were encouraged to also consult IT Services regarding use of the system. **ACTION: Director of Estates and FM**

25/31 Health, Safety and Wellbeing Annual Report to Council 2025

SAF25-P31

31.1 HSE Committee NOTED that the Health, Safety and Wellbeing Annual Report to Council had been approved by members via circulation and subsequently endorsed by Council at its meeting on 27th March.

25/32 Health, Safety and Wellbeing Annual Report and Future Plan

SAF25-P32

- 32.1 HSE Committee NOTED the Health, Safety and Wellbeing Annual Report and Future Plan. The annual report highlighted the vision and strategic principles, progress through 2024 and an overview of plans for 2025.
- 32.2 Members noted that staff wellbeing was to be considered at a forthcoming meeting of Audit Committee. The Director of HSW and the OHW Manager would be in attendance to respond to questions.

25/33 Statutory Compliance Key Performance Indicators

SAF25-P33 SAF25-P34

- 33.1 The Committee RECEIVED updates on statutory compliance key performance indicators.
- 33.2 The Health, Safety and Environment Statutory Compliance Sub-Committee (HSESCSC) had requested that HSE Committee consider resourcing requirements for the LEV and LOLER Duty Authorised Person (DAP) roles, both of which were currently vacant. It had also requested that the Committee consider concerns raised by the Sub-Committee regarding DAP engagement and recognition.
- 33.3 The Committee noted the valuable role played by HSESCSC in providing assurance to the Committee. It was agreed that the Chair should write to the DAPs to thank them for their contribution to providing this assurance. **ACTION: Deputy VC, Director of HSW, Secretary**
- 33.4 DAPs did not receive monetary recognition for taking on DAP roles. However, there was an expectation that their managers would recognise the workload associated with the role and factor it into workload planning.
- 33.5 Members noted the importance of having in place suitably qualified individuals in DAP roles to ensure that they were equipped to carry out the roles effectively and also to provide assurance for external compliance purposes.
- 33.6 Members noted that there was an expectation that a DAP role was an integral part of a post and not in addition to a full-time role. The COO and Director of HSW would discuss an approach to ensure that this was the case moving forward, recognition for individuals where this was not currently the case and plans to identify individuals for vacant DAP roles. **ACTION: COO, Director of HSW**
- 33.7 Estates and FM were encouraged to explore all options to ensure that the vacant DAP roles were filled as soon as possible and be prepared to escalate the matter if necessary. **ACTION: Director of Estates and FM**

25/34 Student Placements, Work-based Learning and Study Abroad Health and Safety Policy

SAF25-P35

- 34.1 The Committee CONSIDERED a new health and safety policy for taught student placements, work-based learning and study abroad. The policy was based on the existing Placements and Work-based Learning Health and Safety Policy and reflected the transfer of placements governance responsibilities from the Careers Network to the Academic Registry. The Assistant Registrar (Placements, Exchanges and Governance) was thanked for the work undertaken to draft the document.
- 34.2 HSE Committee APPROVED the new policy subject to a reference to student wellbeing being expanded to clarify the requirements and to identify who would be responsible for student wellbeing. ACTION: Assistant Registrar (Placements, Exchanges and Governance)
- 34.3 Section 4g) *Incident Reporting* included a link to *Guidelines for Student Fatalities* which appeared to be out of date. The Secretary was asked to identify the owner of the guidelines and request that they be updated. **ACTION: Secretary**

25/35 Incident, Near Miss and Fire Data Report

SAF25-P36

The Committee RECEIVED the latest Incident, New Miss and Fire Data Report.

25/36 Minutes of Sub-Committees

The Committee RECEIVED the minutes of meetings of the following sub-committees:

SAF25-P37

Chemical Safety Committee (Meeting on 16th April 2025)

SAF25-P38

GM and Biosafety Committee (Meeting on 30th January 2025)

SAF25-P39

Health, Safety and Environment Statutory Compliance Sub-Committee (Meeting on 9th April 2025)

25/37 Sport X Sustainability Engagement and Education Program

SAF25-P40

Arising from M25/17 Sustainability Annual Report, a report on the Sport X Sustainability Engagement and Education Program was included in the agenda papers for information.

25/38 Dates of Future Meetings

Wednesday 8th October 2025 at 14.00 Wednesday 4th February 2026 at 14.00 Tuesday 19th May 2026 at 14.00

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Health, Safety and Environment Committee



Matters Arising from Previous Meetings

Origin: Secretary

Executive Summary

Matters arising from previous meetings of the Health, Safety and Environment Committee

Other Committees Consulted

n/a

Action Required:

To NOTE the status of matters arising from previous meetings

| Meeting | Minute | Description | Action | Status |
|----------|--------|--|--|---|
| SAF24-M1 | 13 | Constitution, Terms of Reference and Membership Reflect upon ways to improve Committee's gender balance | Chair, Director of HSW | Was to be considered separately from planned consultation exercise. Will now be included in the transition to the new mode of operations. |
| SAF24-M2 | 23.2 | Critical Risk, Strategy, Control & Compliance: Avoidance and Management of Musculoskeletal Injuries Engage with stakeholders and produce a short analysis of costs/benefits of introducing a new starters' laptop pack. | Specialist Occupational Health and Wellbeing Nurse Manager | ITS now providing new starter packs (laptop, mouse, keyboard, bag, laptop riser) as part of the onboarding process. |
| SAF24-M3 | 37.3 | HSE Update: LSU Consider whether some elements of the roof repair can be accelerated | Deputy VC Dir of Est & FM | The LSU PMB has proposed the roof repairs should be planned for Summer 2026 and the LTM SC has endorsed the project. |
| SAF25-M1 | 4.2 | HSE Update: Student Services May wish to submit request to Space Management Sub-Committee for additional space | Director of Student Services | Student Services does have challenges in appointment spaces for 1:1 student interactions. Operations team working through possible solutions. May result in further space request. |
| SAF25-M1 | 5.5 | New Safeguarding and Prevent Sub- Committee Explore discussed issues relating to under-18s with a view to identifying areas where they tend to be employed/ encountered. Consider whether there is a need for changes to current practice in these areas | Director of Student Services | Proposed Constitution and Terms of Reference to be considered by HSE Committee at its Oct 25 meeting. First meeting of sub-committee is scheduled for October 2025. Issues related to under 18s will form part of the agenda. |
| SAF25-M1 | 10.2 | Climate Change Risk Register Share with LSU good practice arising from development of climate adaptation plan for campus buildings and activities, and development of heat and flood guidance. | Sustainability Manager | High level adaptation plan being developed. To be presented to Sustainability Sub-com on Oct 2 nd . Sustainability Manager planning meeting with LSU team in Autumn to discuss collaboration moving forward. Sustainability Team recently ran Carbon Literacy training for LSU exec & key staff. |

| Meeting | Minute | Description | Action | Status |
|----------|--------|--|-----------------------------------|--|
| SAF25-M1 | 13.3 | Building Safety Act Estates & FM encouraged to factor in new Building Control fire-related requirement into timeframes agreed with contractors and to introduce a penalty clause into contracts for situations where contractors fail to provide drawings in sufficient time | Director of Estates & FM | FM considering addition of penalty clauses to procurement processes. Also seeking to improve communication with the required organisations in complying with the terms of the Building Safety Act. Oct 25 update: Under review. |
| SAF25-M1 | 17.1 | Sustainability Annual Report Consider how to raise awareness within University of activities that engage in | Sustainability Manager | Ongoing. Sustainability Team meeting regularly with M&A to look at strategy to improve communications on sustainability related work. |
| SAF25-M1 | 17.3 | Sustainability Annual Report Identify actions to improve University's rankings. Reference Carbon Jacked X Prog in league table submissions | Sustainability Manager | Work completed. Full report to be presented to Sustainability Subcommittee in October. Improvements expected in People and Planet rankings this year. |
| SAF25-M2 | 25.2 | UNISON Enquiries Meet to discuss issues. Lodge note with the minutes of the meeting | Director of HSW, UNISON rep | Meeting has taken place and clarification given on a number of points. UNISON were satisfied with exception of working time query regarding time allowed for breaks between shifts. The issue was investigated and found to be restricted to small number of colleagues for a particular period of time during a peak period. Colleagues are working to avoid reoccurrences. However, working time regulations recognise this can happen in certain industrial sectors, and compensatory rest is permitted under the regulations. Variations such as this are monitored by local management teams. |
| SAF25-M2 | 25.5 | UNISON Enquiries Meet UNISON rep to investigate potential H&S risks associated with zero-hour contracts. Report back under Matters Arising at Oct meeting. | Director of HSW | Meetings have been held and assurances have been given that appropriate safeguards are in place |
| | 25.6 | Investigate whether Estates & FM managers are able to use TMS system to flag when staff are working back-to-back shifts on consecutive days. | Director of HSW | On investigation this appeared to have occurred over a short period of time, and the issue has been resolved. |

| Meeting | Minute | Description | Action | Status |
|----------|--------|---|---|---|
| SAF25-M2 | 25.6 | UNISON Enquiries Follow up UNISON rep query with HR colleagues | Director of HSW | Meetings have been held and assurances have been given that appropriate safeguards are in place |
| SAF25-M2 | 25.6 | UNISON Enquiries H &S Service member to meet CDRS colleagues ahead of their H&S Com meetings so that issues can be discussed at those meetings rather than being escalated directly to HSE Committee. | Director of HSW | Director of HSW attended the CDRS meeting to work with colleagues locally. |
| SAF25-M2 | 25.6 | UNISON Enquiries Meet with UNISON reps 2-3 weeks before HSE Com meetings to allow time to investigate and report on issues raised. | Director of HSW | These meetings have been arranged |
| SAF25-M2 | 26.4 | RIDDOR incidents Share with SDCA advice on the use of ceramic knives | D Roomes | Clarification received on nature of knives used. Different in SDCA. |
| SAF25-M2 | 27.5 | SSEHS Update Draw Matthew Arnold temperature regulation issues to the attention of Long- Term Maintenance Sub-Committee if wish to use long term | SSEHS Dean + Head of OPs | Awaiting return of Technical Resources Manager for update. |
| SAF25-M2 | 29 | Changes to Operation of Committee Identify School & Prof Service for pilot | Director of HSW | AACME and Marketing & Advancement have volunteered to pilot this approach |
| SAF25-M2 | 30.3 | Royce Hall Leaks Check that Domestic Services staff been issued with guidance so can continue to monitor rooms | Director of HSW | Estates & FM colleagues have given assurance that this has been completed. |
| SAF25-M2 | 30.4 | Safezone System for Mass Notification Consult IT Services regarding use of system | Director of Estates & FM | Software request (SAAS) application has been made to ITS for the adoption of Safe Zone. Oct 25 update: ITS still working on SAAS checks. |
| SAF25-M2 | 33 | DAPs Write to DAPs to thank them for their contribution to providing assurance | Provost, Director of HSW, Secretary | COO has written to DAPs to thank them |

| Meeting | Minute | Description | Action | Status |
|----------|--------|---|--|--|
| SAF25-M2 | 33.6 | DAPs Discuss approach to ensure DAP role is integral part of role, recognition for individuals where it isn't, and plans for vacant DAP roles | COO + Director of HSW | Estates & FM note that it is the view of the COO that DAP roles are part of normal job requirements. Several requests have been made for the University to approach School technical staff. However, there has been no advancement in finding replacement for DAP roles for LOLER and LEV. |
| SAF25-M2 | 33.7 | <u>DAPs</u> Explore all options to ensure vacant DAP roles are filled as soon as possible. Escalate if necessary. | Director of Estates and FM | All necessary actions to fill DAP roles are being taken with the support of the COO. |
| SAF25-M2 | 34.2 | Students Placements, Work-based Learning and Study Aboard H&S Policy Expand reference to student wellbeing to clarify requirements and to identify who responsible for student wellbeing. | Assistant Registrar (Placements, Exchanges & Governance) | Amendments made, and the policy has been published. |
| SAF25-M2 | 34.4 | Students Placements, Work-based Learning and Study Aboard H&S Policy Identify owner of Guidelines for Student Fatalities and request that are updated. | Secretary | Student Services have confirmed that the Guidelines for Student Fatalities has been replaced with new guidance, Responding to a Student or Staff Death. |

Health, Safety and Environment Committee



Constitution, Terms of Reference and Membership for 2025/26

Origin: Director of Health, Safety and Wellbeing & Secretary

Action Required:

To CONSIDER the Constitution, Terms of Reference and Membership of HSE Committee for the 2025/26 academic year.

Executive Summary

There are no proposed changes to the Committee's constitution and terms of reference.

New Members: Professor Rajkumar Roy (new Dean representative) and Adam Lamb (new Head of Operations representative).

Terms of Reference 2025/26

Assurance

- 1. To act on behalf of, and to advise, Senate and Council and senior management on matters of health, safety and environmental policy, structure and communications; and to recommend any action necessary to ensure the health and safety of staff, students and members of the public (including contractors and visitors to University premises).
- 2. To keep under review the University's legal and statutory obligations with regard to health, safety and environmental regulation compliance and to identify through regular monitoring and bring to the attention of senior management and/or Senate and Council areas where compliance is at risk or not being achieved.
- 3. To have oversight and agree the strategic approach to be adopted in relation to Health, Safety, Environmental and Sustainability management.
- 4. To consider and act on reports, both written and verbal, on the health, safety and environmental performance and plans of schools and professional services.
- 5. To consider reports on health and safety and environmental audits, staff training statistics, accident statistics, communications with enforcing authorities, and to make recommendations to relevant University management of any corrective action required.
- 6. To consider aggregated absence statistics and reasons for such absences on a similar basis.
- 7. To consider reports from sub-committees which have been established to ensure compliance with legal requirements; eg the Radiological Protection sub-committee.
- 8. To consider updates on changing legislation and to review and assist in the development of policies and procedures to enable the University to meet all statutory requirements
- 9. To ensure all levels of University management are aware of their safety and environmental obligations and through the receipt of regular monitoring reports to ensure these obligations are being discharged appropriately.
- 10. To consider reports and review personal safety for staff, students and visitors on University premises, particularly where it could impinge on health and safety.
- 11. To monitor staff training and development programmes as they relate to health, safety and environmental issues to ensure appropriate training is provided to enable all managers safely to discharge their duties.
- 12. To review reports on the progress of the University Environmental Management System.

Standard duties

- 13. To report after each meeting to Senate and Council on health, safety and environmental activities and provide Senate and Council with the information required to discharge their duties under the Health and Safety at Work Act (1974), the Management of Health and Safety at Work Regulations (1999) and the Register of Environmental Legislation.
- 14. To review annually its Terms of Reference.
- 15. To review annually its effectiveness.
- 16. To refer business to other Committees as it sees fit.
- 17. To set up and oversee sub groups of the committee and to commission reports from these sub groups as necessary to assist the Committee in its duties, and to produce terms of reference for these groups.

Constitution and Membership 2025/26

| Position | Member |
|--|-------------------------------------|
| Provost and Deputy Vice-Chancellor (Chair) | Rachel Thomson |
| Chief Operating Officer | Richard Taylor |
| Director of Estates and Facilities Management | Graham Howard |
| A Dean of School selected on a rotating basis, to serve for two academic years | Rajkumar Roy |
| A Head of Operations selected on a rotating basis, to serve for two academic years | Adam Lamb |
| Two Lay Members, one of whom shall be a member of Council | David Roomes Luke Stott |
| Students' Union Representative | Liz Monk |
| One representative from each of the recognised Trade Unions: UNITE, UCU, UNISON | Joni Carter-Hendrickson (UNISON) |
| | Alec Edworthy (UCU) |
| | Graham Moody (UNITE) |
| The following Officers of the University will serve on the Committee: | |
| Director of Health, Safety and Wellbeing | Neil Budworth |
| Sustainability Manager | Elliott Brown |
| Human Resources Representative | Alex Stacey-Midgley |
| Co-opted members | Sola Afolabi Jagjit Samra |
| Committee Secretary | Martine Ashby |

Health, Safety and Environment Committee



Constitution, Terms of Reference and Membership for New Safeguarding and Protect Sub-Committee

Origin: Director of Student Services

Action Required:

To CONSIDER the proposed Constitution, Terms of Reference and Membership of Safeguarding and Protect Sub-Committee for 2025/26 academic year.

Executive Summary

HSE Committee is asked to consider the proposed constitution, terms of reference and membership of the new Safeguarding and Prevent Sub-Committee for 2025/26. The Committee will meet for the first time in October.

Terms of Reference

- 1. To advise the Health, Safety and Environment Committee on all matters relating to safeguarding and the Prevent duty.
- 2. To provide University oversight and assurance on all matters relating to safeguarding and the Prevent duty.
- 3. To provide strategic direction and feedback to the Safeguarding Working Group and the Prevent Working Group.
- 4. To collate and analyse critical key data relating to safeguarding and the prevent duty, including reporting trends and near misses.
- 5. To consider issues or concerns raised by the student voice relating to safeguarding and the Prevent duty.

Constitution and Membership

| Chair: Director of Student Services | Charlie Wheeldon |
|---|-----------------------------------|
| (Lead Safeguarding & Prevent Officer) | |
| Deputy Chair: Head of Student Wellbeing & Inclusivity | Karen Watts |
| (Deputy-Lead Safeguarding Officer/ Working Group Chair) | |
| Head of Security | Ant Dales |
| (Deputy-Lead Prevent Officer/Working Group Chair) | |
| SWAI Safeguarding Officer | Kate Wigham |
| Head of Student Life | Helen Rylands |
| Human Resources | Alex Stacey-Midgley |
| Organisational Development and Change | Nominee TBC |
| Loughborough Sport | Nominee TBC |
| EDI Services | Nominee TBC |
| Loughborough London | Richard Barber/ Rachael Brivio |
| Head of Operations x 2 | Nominees TBC |
| Loughborough Students' Union | Nicky Conway |
| | |

Health, Safety and Environment Committee



Feedback on Draft Planning Guidance

Origin: Neil Budworth - Director of Health, Safety and Wellbeing

Executive Summary

Planning guidance was issued to both Marketing & Advancement and AACME. Both have received it well and are progressing. More detailed comments and the AACME draft plan are attached

Other Committees Consulted

None

Equality Diversity and Inclusion Considerations

Wellbeing is an essential element of the Health, Safety and Wellbeing plan and the needs of individuals and marginalised groups should be considered.

Action Required:

To agree to progress with the issuing of guidance and transition to the new planning and scrutiny arrangements

Planning Guidance

Planning guidance was issued to both Marketing and Advancement and AACME to act as pilot areas. The feedback from the areas is as follows

Feedback from M+A

Understand what is required and have made a start. Have not needed to refer to the guidance as such

Feedback from AACME

AACME have used the guidance to produce a new plan (attached) which they believe to be in good shape.

Some key items in the plan include:

- 1. Leadership of H&S. The Dean is undertaking laboratory inspections.
- 2. Both wellbeing and Safety data has been made available.
- 3. Annual cycle of activities. We suggest that once a year, someone from the H&S central team joins our committee and reviews the overall plan and committee effectiveness. This is scheduled for June 2026

AACME H&S Plan

| | Action / Target | Performance indicators | Status / Progress |
|---|--|---|---|
| Leadership activity | There will be quarterly formal H&S committee meetings. The Committee membership will include all job families including DR representation The Dean will chair these meetings and will ensure robust challenge to issues raised. The Head of Operations and the School Technical Manager will also attend H&S committee meetings to provide leadership to operational changes. The Dean and the Head of Operations will attend at least two safety audit tours per year. A positive H&S culture will be driven by the committee through regular audits and other activities, such as the "Researcher Safety Awards" The Dean will include H&S items (corrective or positive) in regular comms to demonstrate commitment. | Check Meeting Schedule Review membership at the end of each year to update for following year. Ensure coverage of Job families and different facilities (e.g. NCCAT, SM, S, workshops, labs) Check attendance Check audit completion and schedule Audit schedule and issues raised checked at every cttee meeting. Researcher awards considered at H&S cttee and publicised to whole school to support positive culture. Check AACME School Newsletters and other comms. | In place – maintain and check. In place – maintain and check. In place – maintain and check. In place – maintain and check. Collect data on audits completed In place – maintain and check. In place – maintain and check. In place – maintain and check. |
| Identification and management of key risks | The Risk Register is a separate document: Risk Register - AACME 2025.xlsm and will be reviewed annually at the H&S cttee. It is also available to all staff on the intranet: Communication School of AACME - Intranet Loughborough University for engagement and transparency. The H&S Committee has a standing agenda item to review all data on accidents and near misses. These are discussed to identify recurrent issues or any learning for | Check Risk Register and update annually Check agenda and action log for actions taken to prevent accidents and near misses. Update agenda template to ensure annual review items (eg membership etc) are included. Check Hydrop Legionella Prevention system. | Risk Register in place. Arrange Annual Committee review In place. Continue. Agenda template has been updated to include annual review items In Place – maintain and check with Tech Managers. |

| | Action / Target | Performance indicators | Status / Progress |
|---|--|--|--|
| | other areas of the School and follow up actions are recorded on the action log. 3. Legionella Prevention activities are built into the standard lab maintenance schedule for all technicians. This involves flushing specific taps. 4. Sick leave / OH data. This will be provided to H&S Cttee for review and discussion. The outcomes and data will also be referred to SMT and the EDI cttee where further actions will be considered. | 4. Monitor sick leave and OH referrals across the school to observe trends and areas of concern. For example, are there particular areas of the school or job families where absence is higher and wellbeing lower? Discuss outcomes and refer findings to the EDI committee and to SMT to support action where necessary. | 4. This is new to the H&S committee so needs to be implemented. |
| Activity to protect and promote wellbeing | Monitor sick leave and OH referrals as above. Ensure all line managers are familiar with the support available, e.g. OH referrals, EAP, HR support etc. All staff who join the school are assessed for OH risks and monitored routinely if they are exposed to such risks. The School will assess existing staff to ensure that they are supported through health surveillance, followed by any necessary actions. | Check sick leave and OH referral data as above. Work with Line managers across Professional Services staff and academic staff to ensure all are aware of the relevant processes and support. Many are new to the line management role so will need particular support. This will be driven by SMT, not H&S committee. Technical line managers will complete health risk assessments for current staff and organise health surveillance where necessary. Check how many staff have had issues relating to work activity. Check how many staff have been referred to OH for routine health surveillance. | This is new to the H&S committee so needs to be implemented. This is partially in place but needs further implementation. This will be driven by SMT, not H&S committee. This is partially in place but needs further implementation |
| Optimisation of health and safety | The detailed items above and below in this plan will ensure a good H&S management system - if they are implemented and monitored effectively. | Ensure standing items are all in place for regular review as follows: • Previous Actions – every meeting | All in place except • Dean's 2 x annual lab tour |

| | Action / Target | Performance indicators | Status / Progress |
|---------------------------------------|--|--|---|
| management system | The best way to ensure optimisation of AACME's overall health and safety management system is to have an annual external audit of the effectiveness of our committee and of this plan. We will invite the LU H&S team to do so. | Incidents and near misses – every meeting Routine Lab audits – every meeting 2 x Dean's annual lab inspection – 2 x per year H&S Alerts – every meeting Compliance update – every meeting Review of Committee effectiveness and the H&S Plan – 1 x per year. | Review of Committee effectiveness and the H&S Plan – 1 x per year. H&S team to attend. |
| Activities to ensure legal compliance | Ensure all inspection and maintenance activities are up to date and compliant with regulatory requirements (e.g. PUWER). Ensure sufficient fire marshals are in place across all buildings Ensure all staff are up to date with relevant compliance training as listed on the HR website. For academic staff this includes "trusted research" activities such as Export Control. | Use internal DAP audits to check all routine items and logbooks are up to date including: LEVs / FCs in labs. Legionella Prevention Flushing – Hydrop. PUWER and LOLER compliant record keeping in relation to equipment in labs and workshops. HTA compliance checked with HTA nominated staff member (currently Karen Coopman) and Bio Tech Team (Tim Coles) Check mandatory training compliance through School admin and HR records. | In Place – maintain and check with Tech Managers in workshop and laboratory teams and NCCAT. Discuss with Karen and Tim In Place – maintain and check with Sarah Hawker |
| Health and Safety Training | Complete H&S Induction training for all new staff and students. Mandatory Safety Training is in place across the University. Assess training requirements in each technical team. Identify gaps and areas for development. | H&S Induction requirements are set out on the Learn Safety Page: Module: 25AACME01 - School of AACME Safety Page Learn All students must complete this before they can work in labs. Records are checked. | In place – maintain and check. In place – maintain and check Work in progress for 2025-26 |

| | Action / Target | Performance indicators | Status / Progress |
|------------------------|--|--|---|
| | | New staff / researchers meet technical team for safety induction. Check and enforce. | |
| | | Monthly checks are carried out on all LU mandatory training by HR. Data is provided to School Administrator (Sarah Hawker) who then chases staff as needed. This data is available to the Dean and Head of Ops. Check other specialist training in specific technical teams. This is case by case depending on role and team needs. | |
| Audit and inspection | Routine lab audits are conducted on an ongoing basis. | Routine lab audits checked at each H&S committee meeting | In place – maintain and check |
| Пэрссион | 2. 2 x Annual lab inspections to be carried out with Dean and Head of Ops in attendance | 2 x Annual lab inspections to be carried out | To be scheduled. In place – maintain and |
| | LU Internal Audits carried out (eg Sustainability, PUWER, LOLER) | LU Internal Audits already in place. Check how many occur each year. | check |
| Engagement and | Inductions to be carried out with relevant Technical Manager. This sets the right tone for new staff / students and helps build a | All safety inductions carried out. Ensure consistent approach. Check any new staff / researchers as part of lab audits. | In place – maintain and check |
| communication activity | good safety culture. | Check visiting staff safety training | 2. Needs to be implemented |
| activity | 2. Ensure good engagement with visiting and short-term staff. | records. Again, this can be checked in lab audits. | In place – maintain and check |
| | 3. Safety Items to be included in all-staff communications such as Dean's newsletter | Check all-staff communication | 4. In place – maintain and |
| | and staff department meetings. | Check safety alerts. Report these to H&S committee and ensure follow up | check |
| | Exceptional items such as H&S Alerts to be communicated to all staff with individual meetings held in labs with any particular staff / groups directly affected. | actions with individual staff groups as necessary. | |

Health, Safety and Environment Committee



Future Business

Origin: Director of Health, Safety and Wellbeing

Action Required:

To CONSIDER key business for future meetings

Executive Summary

Paper proposes key business items for meetings scheduled from October 2025 to October 2026.

Proposal for Future Business

Oct 2025 Meeting

HSE Update from Campus Services / Catering / Accommodation element of Estates and Facilities

HSE Update from Loughborough Sport

Critical risk presentation response to incidents requiring mass communication Agree H&S RAG Rating

Feb 2026 Meeting

HSE Update from Wolfson

HSE Update from School of Aeronautical, Automotive, Chemical and Materials

Engineering

Critical risk presentation management of the risks posed by increased construction / contractor activity

Review of Health and Safety Planning pilot

Occupational Health and Wellbeing Annual Report

Radiation Protection Annual Report

Agree H&S RAG Rating

May 2026 Meeting (Structure to be confirmed subject to planning trials)

HSE Update from the School Design and Creative Arts

HSE Update from School Social Sciences and Humanities

Consideration of consultation on structure and operation of the HSE committee

Critical risk presentation suicide prevention strategy and / or Fire Management

Strategy, Risks and Compliance

Subjects of previous meetings

October 2021 Meeting

HSE Update from School of Mechanical, Electrical and Manufacturing Engineering HSE RAG Rating

February 2022 Meeting

HSE Update from School of Science

HSE Update from Campus Services / Catering / Accommodation element of Estates &

FΜ

Health and Safety Annual Report

Annual Radiation Protection Report

HSE RAG Rating

May 2022 Meeting

HSE Update from Estates & Facilities Management (excluding Catering, Domestic &

Residential Services)

HSE Update from Student Services

October 2022 Meeting

HSE Update from School of Sport, Exercise and Health Sciences

HSE Update from Sports Development Centre

Presentation on Fire Management Strategy, Risks and Compliance

Occupational Health and Wellbeing Service Annual Report

HSE RAG Rating

H&S Strategic Long-term Plan

Sustainability Annual Report

February 2023 Meeting

HSE Update from School of Aeronautical, Automotive, Chemical and Materials Eng.

Presentation on Water Management Strategy, Risks and Compliance

H& S Annual Report

Radiation Protection Annual Report

Chemical and Biological Safety Annual Report

May 2023 Meeting

HSE Update from School of Design and Creative Arts

HSE Update from School of Social Sciences and Humanities

Presentation on critical risk, strategy, control and compliance Human Tissue Act

October 2023 Meeting

HSE Update from Loughborough Business School

HSE Update from Loughborough University London

Presentation on critical risk, strategy, control and compliance – On campus events

HSE RAG Rating

February 2024 Meeting

HSE Update from Imago

HSE Update from Campus Services / Catering / Accommodation element of Estates

and Facilities

Presentation on critical risk, strategy, control and compliance – Chemical safety

arrangements

H& S Annual Report

Radiation Protection Annual Rep

May 2024 Meeting

HSE Update from Wolfson School of Mechanical and Electrical Engineering

HSE Update from School of Science

Presentation on wellbeing, critical risk management avoidance and management of

musculoskeletal issues

October 2024 Meeting

HSE Update from Loughborough Students Union

HSE Update from Marketing and Advancement

HSE RAG Rating

Presentation on stress and mental wellbeing

Feb 2025 Meeting

HSE Update from Student Services
HSE Update from Estates and Facilities Management
Occupational Health and Wellbeing Annual Report
Radiation Protection Annual Rep
Agree H&S RAG Rating

May 2025 Meeting

HSE Update from School of Architecture, Building and Civil Engineering
HSE Update from School of Sport, Exercise and Health Sciences
Consideration of consultation on structure and operation of the HSE committee
H&S Strategic Long-term Plan
Critical risk presentation on stress and mental wellbeing
Placements policy review

HSE Health, Safety and Environment Committee



Consolidated Health, Safety and Wellbeing Report

Origin: Professor Neil Budworth, Director of Health, Safety and Wellbeing

Action Required:

To note areas of risk and actions identified

Executive Summary

This is a summary report of issues and actions relating to Health, Safety and Wellbeing

Other Committees Consulted

None

Equality Diversity and Inclusion Considerations

The Safezone app, if adopted, can provide additional assurance to those with mobility or medical needs as the app contains a panic button which will raise the alarm and will allow the individual to be located.

HSE Committee Report –

| Subject area / Statement | Issue to note | Action Required from HSE Committee |
|---|-----------------------|--|
| General Update | | |
| Training for the University Leadership Group | | None |
| Paul Verrico from Eversheds will deliver a training session to the June University Leadership Group meeting. Paul is well known in the sector and has briefed or trained more than half of the University leadership groups in the UK. | | |
| Paul will deliver a second session on 1st October for those who were unable to attend the June session. | | |
| Risks from Cricket | | |
| There has been a noticeable increase in the number of Cricket balls leaving the cricket pitches. This is a result of improved performance and a change in the style of play. | To note residual risk | |
| An analysis has been undertaken of the likely cricket ball trajectories and the likely level of injury should someone be hit to support the risk assessment process. In additional a more detailed trajectory report has been commissioned from the industry experts. | | |
| A range of controls have been introduced to reduce the likelihood of balls exiting the pitches, but they are unlikely to entirely eliminate this risk. | | |
| | | |
| | | |
| | | |

| School of Design and Creative Arts Table Top Exercise | | |
|---|---------|------|
| A table top emergency planning exercise was held with the School of Design and Creative Arts senior leadership team. A scenario was developed to test how the team would manage a significant event at their most vulnerable time. The team did well, learned from the scenario and enjoyed the activity. | | |
| The aim of the exercise was to develop capability around crisis management and business continuity and to determine if this was a suitable approach to be used to support other schools and professional services. | | |
| Serious Incidents | | |
| A serious fire occurred on the roof of G block in August. The fire started as a result of grinding activity which was undertaken to remove part of the existing roof structure. The contractors involved maintained a fire watch, but the fire started around 2 ½ hours after the grinding activity and ½ hour after the fire watch had finished. | To note | None |
| An Incident Review Panel was held on 20 th August. | | |
| Following the investigation and review the hot work arrangements for contractors was revised, additional materials and training will be provided to the internal incident response team and communication arrangements will be reviewed. | | |
| | | |
| | | |

Bus Fire

A Kinch bus caught fire opposite the Paddock pitch on Wednesday 17th September. Kinch are investigating the cause of the fire and will report back to Elliott Brown.



The University response was smooth with Security managing traffic and Facilities being ready to deal with any damage to the road. The Leicestershire Fire and Rescue response was quick and Kinch were able to arrange recovery quickly.

Overturned Dumper Truck

A small 1 tonne site dumper partially overturned while carrying out excavation work next to the Wolfson building.

The dumper's roll protection bar smashed through one of the Wolfson 'Pantry' café windows.

No one was injured. The window's structural composition and the confined work area helped prevent a total overturn. There was a fast and effective incident response and an EFM investigation was conducted with the contractor. Corrective actions were agreed and put into place.



| Compliance | | |
|--|---|---------|
| Legionella in Towers | | |
| The water system in Towers continues to be closely monitored. | Continued management of risk within Towers. | To note |
| Over the Summer break filters and strainers have been removed from the West tower and the cold water system has been dosed with a high concentration of Hydrogen Peroxide. | of flok within Towers. | |
| The system was then flushed to clear the chemical and biofilm debris. This action resulted in a very significant improvement in the water system. Low residual amounts of legionella (below defined levels of concern) were found in cold water riser 4 and a second disinfection took place in this riser. The aggressive nature of the chemicals used is having an impact on the integrity of the pipe work and the second disinfection caused a number of pin hole leaks. | | |
| The system which doses the water system in Towers with low levels of disinfection is being replaced with a different unit and doing regime which is more in keeping with the current status of the building. | | |
| On the advice of our eternal advisers point of use filters will not be used on taps, but will be used on showers. | | |
| Sampling will continue on both East and West towers to monitor the status of the water system. | | |
| Currently the plan is to occupy Towers until 2027. | | |
| Legionella | | |
| A question was raised at the October 2024 HSE committee meeting regarding the training of those charged with flushing the water system. | | To note |
| Tool box talks have been delivered to all relevant colleagues. | | TO HOLE |
| There is an intention to produce a video and supporting education pack. The production of the video and pack are scheduled for December 2025. | | |

| Policy & Procedure | |
|---|--|
| Health and Safety Planning Guidance | |
| As part of the planned changes to the way the HSE Committee works, Health and Safety planning guidance has been given to Marketing and Advancement and AACME. Both will seek to develop plans using this guidance in the Autumn terms providing feedback to the University Health and Safety Service and HSE committee. The guidance will then be reviewed before being distributed to Schools and Professional Services for use. | |
| Mass Notification and Lone Worker Management | |
| The Director of Estates and Facilities Management will be recommending to SPaRC that the University adopt the Safezone system. | |
| The system is currently being progressed through the IT assessment and procurement process. | |
| This software is being investigated as part of a response to the introduction of the so called 'Martyn's Law'. | |
| | |

Occupational Health and Wellbeing Occupational Health To note the continued An analysis of the use of the University Employee Assistance Programme over the last 4 and growing demand years shows that there has been an increase in usage. This is very positive as it indicates that there is a good and growing level of awareness of the Employee Assistance Programme and what it can offer. EAP Rolling 12 Month Average Usage 650 600 550 500 400 350 300 250 Aug-23 Dec-23

| Biological | | |
|--|---|-------|
| A series of audits is being conducted of the University's biological laboratories. So far 7 audits have been completed. 1 laboratory has yet to be audited. The last audit was delayed by construction work in James France. Overall compliance is good, common issues include: High temperatures in some laboratories with temperatures exceeding 30°C in some laboratories. Issues resulting from shared spaces both tenants and schools. Concerns with some laboratory designs – eg the design resulted in material being transported around the building and in some areas there was a lack of handwash sinks. | To note changes to training and assurance. | None |
| Chemical | | |
| Expansion of work with Hydrogen | To note the expansion of work with Hydrogen | None. |
| Hazard and operability studies (HAZOP) have been conducted as part of the LoCEL- H2 project. A range of expertise was gathered from the Wolfson School and the Health and safety team to undertake these assessments. | | |
| The HAZOP process investigates the risks and controls associated with equipment and materials used prior to commissioning. | | |
| Support of an external consultant has been sought to determine the risks, the feasibility and logistics of installing an external hydrogen storage facility at Powertrains to expand hydrogen research capabilities. | | |

| Fire | |
|--|--|
| Discussions are being held with Leicestershire Fire and Rescue regarding the fire arrangements within the Towers Halls of residence. At present no additional work is required, but ongoing liaison is considered important following the introduction of the Building Safety Act. | |

Health, Safety and Environment Committee



Recommendation for the University RAG Rating

Origin: Neil Budworth, Director of Health, Safety and Wellbeing

Action Required:

HSE Committee are asked to approve the RAG Rating to be passed to Senate and Council

Executive Summary

The Director of Health, Safety and Wellbeing is asking the HSE committee to consider the current HSE risk rating with a recommendation that the overall risk rating be set at 2 Light Green for this period

Other Committees Consulted

None

Equality Diversity and Inclusion Considerations

None

Recommendation

The Director of Health, Safety and Wellbeing is currently recommending that the overall risk rating be set at Green for this period.

Methodology

The Director Health, Safety and Wellbeing has reviewed the compliance key performance indicators, the incident rate for the University, Occupational Health trends and emerging issues and on the basis this data has determined the overall risk rating.

Discussion

Whilst there are positives and negatives to be considered across the University Estate, there are a number issues which remain concerns and so influence the decision on the risk rating. I am satisfied that these key risks have mitigations either planned or in place. Which allow me to recommend a Light Green risk rating this period.

The significant issues are :-

Legionella continues to be a challenge. The risk has been identified and additional controls are in place, in the higher risk buildings. In particular, close attention is being paid to the water systems in Towers and the controls which have been introduced are managing the situation. In particular work over the Summer months appears to have been successful in achieving a meaningful improvement in Legionella control.

Following on from Grenfell and the fire in student accommodation in Bolton, fire risk management continues to be a changing and developing landscape which is being carefully monitored. Mitigations plans have been developed and are in place. Whilst there are on going cost and compliance challenges safety is being maintained. Should the lifespan of the Towers hall of residence be extended then additional regulatory / compliance risks may occur. Activity is underway to determine the likelihood and extent of any risk.

Mental Health and Employee Wellbeing – In line with the rest of the sector this continues to be a challenge. The University has a full range of mitigation in place and is taking proactive action. New tools have been developed and deployed to support senior leaders. Ongoing activity is needed in this area to manage the risk

As shown by the recent fire on G Block roof, increased construction and refurbishment activity on campus is likely to increase the level of risk. However, there are robust process and supervisory arrangements in place to minimise this risk.

Finally, there have been increasing numbers of cricket balls exiting the playing ground due to changes in the way in which the game is being practiced and played. There are limited options to manage the risk of individuals and property being struck by balls, but a detailed assessment has been undertaken and mitigation measures are being put in place where practicable. There is a high likelihood of property damage and a vey low risk of personal injury to pedestrians.

Taking these factors into account a Light Green rating is recommended for this period.

Neil Budworth, Director of Health, Safety and Wellbeing

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Additional Information

At the October 2024 HSE meeting members requested that an explanation be given of the risk rating categories. The following key has been provided.

Assessment Key

| RrAgG | Description of assessment |
|-------|--|
| 1 | Performance is ahead of target - data suggests cause for celebration |
| 2 | Performance is on track, data suggests no concerns |
| 3 | Performance is moderately behind target and data suggests this is a slight concern, we are keeping a watching brief and/or taking appropriate action |
| 4 | Performance is behind target and data suggests this is a cause for concern - we have a clear and resourced plan to recover performance in the next two years - or - request to adjust milestones |
| 5 | Performance is substantially behind target, data suggests this is a serious concern and/or we have no clear/resourced plan to recover performance - request to adjust milestones |

Previous RrAgG Ratings

| February 2025 | 2 |
|---------------|---------|
| October 2024 | 2 |
| October 2023 | 'Green' |
| October 2022 | 'Green' |
| February 2022 | 'Green' |

Health, Safety and Environment Committee



Review of University Health and Safety Policy

Origin: Neil Budworth - Director of Health, Safety and Wellbeing

Executive Summary

The University Health and Safety Policy document has been updated in line with the policy review process. Changes have been made to reflect the responsibilities of the Deputy Vice Chancellor and also to reflect a number of job title changes. Otherwise the policy remains largely unchanged.

Specifically the following responsibility was added in for the Deputy Vice Chancellor

3.3 Deputy Vice Chancellor

The Deputy Vice Chancellor Chairs the University Health and Safety Committee.

In this role they are responsible for ensuring that the committee is properly constituted, meets regularly and fulfils the functions delegated to it by University Council.

Through the committee the Deputy Vice Chancellor will assure the Council that there is a clear understanding of the risks within the University; that risk controls have been developed and are in place; that the existence and effectiveness of these controls is being monitored.

Through the committee the Deputy Vice Chancellor will ensure that mechanisms are in place to monitor compliance with the legal requirements placed upon the University.

The Deputy Vice Chancellor will be responsible for providing a report to Council on the overall assessment of the risks faced by the University and the level of compliance. They will also be responsible for highlighting any areas of risk or concern to Council.

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Other Committees Consulted

None, but changes agreed in consultation with the Vice Chancellor

Equality Diversity and Inclusion Considerations

None

Action Required:

To approve



UNIVERSITY HEALTH AND SAFETY POLICY STATEMENT AND ARRANGEMENTS

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Loughborough University Health and Safety Policy

1. Introduction by the Vice Chancellor

The health, safety and wellbeing of our staff and students underpins the success and flourishing of the University. If colleagues do not feel safe and well, then they will not feel valued and respected, and we will not achieve the ambitious aims of our "Creating Better Futures. Together" strategy. Indeed, the strategy explicitly highlights health and wellbeing as one of its core themes.

Whilst we are compelled by the Health and Safety at Work Act 1974 to produce a statement of policy, I view this as the minimum underpinning commitment. I want us to do more. I want us to continually strive to achieve the highest practical standard in health, safety and wellbeing, rather than rely on the legal minimum. This means managers at all levels need to actively pursue increasingly higher standards of health and safety management.

I recognise the importance of our staff and students being fully aware of their responsibilities and the importance of all working together to ensure that the Health and Safety Policy and Procedures are observed and so I fully endorse this policy which sets out those responsibilities.

To this end, this document brings the University's statement of health and safety policy to the attention of everyone, our employees and our students, and it provides details of the organisation and arrangements for carrying out the policy. The policy statement is supplemented by individual procedures covering a range of topics and everyone must ensure they are aware of the safety precautions appropriate to the area in which they work.

As Vice Chancellor I recognise that I carry the overall responsibility for the health and safety of all persons affected by the undertakings of the University. However, the reality is that everyone has a role to play in ensuring that the University remains a safe and healthy place to work -- only by working together can we create an environment that is safe, healthy and promotes wellbeing.

Professor Nick Jennings CB FREng FRS Vice Chancellor and President

September 2025

2. The Health and Safety Policy Statement

It is the policy of Loughborough University under the University Council to:

- 1. Regard legal compliance as the lowest acceptable standard of management when considering health and safety. (for the purposes of this policy document the term 'health and safety' will be deemed to include all aspects of occupational health.)
- 2. Regard health and safety as a core management function.
- 3. Develop a clear structure which identifies health and safety responsibility at all management levels across the University.
- 4. Promote an attitude of safe working by employees and students in all aspects of the University's work underpinned by appropriate disciplinary procedures.
- 5. Encourage discussion and consultation between management, employees and students on safety, health and environment matters and establish a Health, Safety and Environment Committee for this purpose.
- 6. Maintain a safe and healthy working environment and safe methods of operation.
- 7. Ensure the provision and maintenance of premises, plant and equipment to a safe level
- 8. Ensure the provisions of appropriate resources to meet health and safety issues.
- 9. Ensure that provisions are made to support the mental health of staff.
- 10. To bring to the attention of all staff and students, their responsibilities to ensure the health and safety of themselves and any other persons affected by their actions or omissions.
- 11. Provide all necessary information, instruction, training and supervision, to ensure the health and safety of employees at work.
- 12. Provide as appropriate and ensure the correct use of, approved safety equipment and protective clothing and to ensure no charge will be levied on any employee in respect of anything carried out or provided in pursuance of any specified requirements of relevant statutory provisions.
- 13. Ensure immediate and accurate reporting and investigation of occupational ill-health issues, accidents and incidents.
- 14. Ensure the provision of an appropriate number of specialist safety staff with responsibilities for safety and health and to ensure appropriate contingency arrangements are made during the absence of such staff to meet the relevant statutory requirements.
- 15. Develop a system of inspection, monitoring and auditing procedures which will allow the identification of risk and ensure that acceptable standards of risk management are being achieved across the University.
- 16. Review this Health and Safety Policy not less than once every two years.

- 17. Make specific arrangements on sites controlled by the University to ensure that contractors are carrying out their responsibilities for Health, Safety and Environment to a standard acceptable to University management.
- 18. Ensure that the health and safety of all staff, students, contractors, visitors and any others who may be affected by our undertakings is safeguarded, so far as is reasonably possible.

The University Council acknowledge ultimate responsibility for Health and Safety management within Loughborough University. This responsibility will be discharged on behalf of the University Council by the Vice Chancellor through the University management structure.

3.1 University Council

The University Council, under the requirements of the Health and Safety at Work etc Act 1974, is responsible for issuing a written statement covering the general policy with respect to Health and Safety at work of employees, students and others affected by the undertakings of the University.

The University Council shall ensure that they receive sufficient information on the status of University health and safety management systems to satisfy themselves that all statutory requirements are being met. To this end they will commission an annual health and safety report to be undertaken by the Director of Health, Safety and Wellbeing.

While statutory compliance will be accepted as a baseline standard, the University Council will ensure that the University is constantly moving towards the best possible health and safety practice.

Recognising that the University is a large, complex and rapidly developing organisation and that regulatory changes occur, if areas are identified which fall below statutory compliance Council will require an action plan to be produced which brings the University back into compliance as quickly as reasonably practicable and will require reports on the progress of any such plan.

3.2 Vice Chancellor

The Vice Chancellor is responsible for achieving the objectives of the University's Health and Safety Policy, namely to:

Ensure that managers know and undertake their individual responsibilities regarding health and safety, and that the requirements of health and safety legislation and University policy are met

Advise the University Council of the resources required to comply with statutory requirements and make adequate arrangements

Ensure adequate consultations between management, specialist advisors and employees' representatives prior to the introduction of any change which may affect the health and safety of employees

Make the necessary arrangements to ensure that trades union safety representatives who are appointed under statutory regulations can carry out their functions as defined in the relevant legislation

Ensure the establishment and maintenance of a suitable health and safety programme to:

- eliminate accident potential as far as is reasonably practicable
- conform with the statutory duties and University codes of practice

Ensure that adequate communication channels are maintained to promulgate information concerning health, safety and environment

3.3 Deputy Vice Chancellor

The Deputy Vice Chancellor Chairs the University Health and Safety Committee.

In this role they are responsible for ensuring that the committee is properly constituted, meets regularly and fulfils the functions delegated to it by University Council.

Through the committee the Deputy Vice Chancellor will assure the Council that there is a clear understanding of the risks within the University; that risk controls have been developed and are in place; that the existence and effectiveness of these controls is being monitored.

Through the committee the Deputy Vice Chancellor will ensure that mechanisms are in place to monitor compliance with the legal requirements placed upon the University.

The Deputy Vice Chancellor will be responsible for providing a report to Council on the overall assessment of the risks faced by the University and the level of compliance. They will also be responsible for highlighting any areas of risk or concern to Council.

3.4 Chief Operating Officer

The Chief Operating Officer (COO) is responsible to the Vice Chancellor on a delegated basis for the general oversight and development of health and safety policy and for ensuring co-ordination of such policies and practice across the University. The COO has responsibility for ensuring that the arrangements to manage health and safety in accordance with University policy are effective.

3.5 Deans of Schools

Overall legal responsibility for ensuring the safety of staff, students and others who may be affected by School activities resides with the Dean of School.

Deans of Schools have oversight of resources devolved from the Vice Chancellor. As such, they have a duty not only for the application of these resources, but that they are applied safely. Deans of School should satisfy themselves that the Departments within their area of responsibility have suitable and sufficient arrangements in place to meet all statutory requirements.

- 1. The provision and maintenance of plant and systems of work that are, so far as is reasonably practicable, safe and without risks to health.
- Arrangements for ensuring, so far as is reasonably practicable, safety and absence of risks to health in connection with the use, handling, storage and transport of articles and substances.
- 3. The provision of such information, instruction, training and supervision as is necessary to ensure, so far as is reasonably practicable, the health and safety at work of their employees.
- 4. So far as is reasonably practicable as regards any place of work under the employer's control, the maintenance of it in a condition that is safe and without risks to health and the provision and maintenance of means of access and egress from it that are safe and without such risks.
- 5. The provision and maintenance of a working environment for their employees that is, so far as is reasonably practicable, safe, without risks to health, and adequate as regards facilities and arrangements for their welfare at work.

To deliver these statutory requirements, Deans are expected to:

- Produce a School health and safety policy which sets out the local organisation and arrangements to meet all relevant statutory and University policy requirements.
- Establish a health and safety committee(s) for the School (or specific areas or disciplines
 within the School if appropriate). Attend the School health and safety committee or
 receive minutes from Departmental committees.
- Receive twice yearly audit reports from the Head of Operations in the School.
- Ensure that procedures for producing suitable and sufficient risk assessments are properly integrated into School's management systems.
- Ensure that the health and safety training needs are identified, and that suitable training is provided. (See **Appendix 3**; "Loughborough University Staff Training Matrix").

- Ensure that either a School Safety Officer (to act for the whole School) and/or Departmental Safety Officers are appointed. In the absence of a nominated officer this role shall default to the Dean of School.
- Allocate the necessary resources, both in terms of time and financial resources, to staff appointed to carry out a health and safety role, particularly with regard to their School Safety Officer.
- Bring to the VC's attention, any health and safety matter that cannot be dealt with at School level.
- Devise and implement phased order of priority plans for expenditure of finance or effort to solve health and safety problems in the School which cannot be resolved at one particular time.

3.6 Directors and Heads of Professional Services

Overall legal responsibility for ensuring the safety of staff, students and others who may be affected by their activity resides with the Director or Head of Service.

Directors and Heads of Professional Services have oversight of resources devolved from the Vice Chancellor. As such, they have a duty not only for the application of these resources, but that they are applied safely. Directors and Heads of Professional Services should satisfy themselves that their area of responsibility has suitable and sufficient arrangements in place to meet all statutory requirements.

- 1. The provision and maintenance of plant and systems of work that are, so far as is reasonably practicable, safe and without risks to health.
- 2. Arrangements for ensuring, so far as is reasonably practicable, safety and absence of risks to health in connection with the use, handling, storage and transport of articles and substances.
- 3. The provision of such information, instruction, training and supervision as is necessary to ensure, so far as is reasonably practicable, the health and safety at work of their employees.
- 4. So far as is reasonably practicable as regards any place of work under the employer's control, the maintenance of it in a condition that is safe and without risks to health and the provision and maintenance of means of access and egress from it that are safe and without such risks.
- 5. The provision and maintenance of a working environment for their employees that is, so far as is reasonably practicable, safe, without risks to health, and adequate as regards facilities and arrangements for their welfare at work.

To deliver these statutory requirements, Directors and Heads of Professional Services are expected to:

- Set out the local organisation and arrangements to meet all relevant statutory and University policy requirements.
- Establish a health and safety committee or agree with the Director of Health, Safety and Wellbeing alternative consultation arrangements. Attend the health and safety committee

established for their area, or, if alternative arrangements are made take such steps to ensure that they are kept informed of relevant information and actions.

- Receive twice yearly audit reports for the service or department.
- Ensure that procedures for producing suitable and sufficient risk assessments are properly integrated into service or department management systems.
- Ensure that the health and safety training needs are identified, and that suitable training is provided. (See **Appendix 3**; "Loughborough University Staff Training Matrix").
- Ensure that an individual is nominated to act as a health and safety lead in the area of responsibility.
- Allocate the necessary resources, both in terms of time and financial resources, to staff
 appointed to carry out a health and safety role, particularly with regard to their health and
 safety lead.
- Bring to the Chief Operating Officer's attention, any health and safety matter that cannot be dealt with at function or departmental level.
- Devise and implement phased order of priority plans for expenditure of finance or effort to solve health and safety problems in the area of responsibility which cannot be resolved at one particular time.

3.7 Head of Operations

The Head of Operations works closely with the associated Dean or Head of Professional Service to ensure that Key Performance Indicators (KPI's) are achieved.

The School's Head of Operations is responsible for;

- Ensuring that 6 monthly internal health and safety audits are conducted, and the results are forwarded to the Director of Health, Safety and Wellbeing.
- Ensuring that the Health and Safety Committee meets at least 3 times per year.
- Ensuring that all accident/near miss events are reported via the University's incident reporting system.
- Ensuring that action is taken to identify and remove causes of accidents *I* near miss events.
- Reviewing procedures for producing risk assessments to ensure that risk assessments are suitable and sufficient and up to date.
- Bringing to the attention of the Dean or Director / Head of Professional Service any breach of statutory requirement or other health and safety concern which cannot be resolved.

3.8 Director of Health, Safety and Wellbeing

The Director of Health, Safety and Wellbeing has a central co-ordinating role in relation to general health and safety matters and acts as advisor to the University on health and safety strategy and the requirements and interpretation of relevant legislation. The Director of Health, Safety and Wellbeing has a vital role in the development of the University's health and safety policy and plan, and the development of a health and safety management system.

The Director of Health, Safety and Wellbeing will ensure the effectiveness of health and safety management structures through regular auditing of these systems.

The Director of Health, Safety and Wellbeing will present, through the University Health, Safety and Environment Committee, to the University Council an annual report on the status of the

University Health and Safety Management systems and procedures.

The Director of Health, Safety and Wellbeing is responsible to the COO for all University facing health and safety matters

The Director of Health, Safety and Wellbeing will be the nominated 'competent person' on behalf of Loughborough University, as required by the Management of Health and Safety at Work Regulations 1999.

3.9 Radiological Protection Officer

The Radiological Protection Officer role will be performed by a suitably qualified and experienced member of staff. The role is currently discharged by the Senior Health and Safety Specialist. The Radiological Protection Officer provides advice on all aspects of radiological protection in the University, with particular reference to the statutory requirements relating to the Ionising Radiation Regulations 2017, together with various codes of practice.

The Radiological Protection Officer will co-ordinate arrangements for the safe ordering, storage, handling, use, transporting and disposal of radioactive substances.

The Radiological Protection Officer will act as a link to the contracted services of the Radiological Protection Advisor and reports to the Director of Health, Safety and Wellbeing.

3.10 Deputy Health Safety and Risk Manager

The Deputy Health Safety and Risk Manager acts as a deputy to the Director of Health, Safety and Wellbeing and also acts as 'competent person' under the Management of Health and Safety at Work Regulations, in the absence of the Director of Health, Safety and Wellbeing. Specific areas of responsibility include;

- responding to requests for service from Schools / Departments, providing support and information to SSO's / DSO's,
- investigating accidents and liaising with the University's insurers, and,
- organising and providing health and safety training for staff.(See **Appendix 3**; "Loughborough University Staff Training Matrix").

The Deputy Health, Safety and Risk Manager reports to the Director of Health, Safety and Wellbeing.

3.11 Head of Occupational Health and Wellbeing

The Head of Occupational Health and Wellbeing, in consultation with the Occupational Health Physician, shall advise the University on workplace or work-related health matters.

The Head of Occupational Health and Wellbeing will develop, on behalf of the Health, Safety and Environment Committee, University occupational health policy.

The Head of Occupational Health and Wellbeing will advise the University on the development of suitable approaches to improving Health, Mental Health and general wellbeing throughout the University.

The Head of Occupational Health and Wellbeing will carry out monitoring and auditing of occupational health issues to ensure compliance with University policy.

The Head of Occupational Health and Wellbeing is the link to the contracted services of the Occupational Health Physician and reports to the Director of Health, Safety and Wellbeing.

3.12 University Fire Safety Lead

To University Fire Safety Lead will provide professional fire safety advice as needed to staff and students across the University. Other duties include:

The University Fire Safety Lead will act as 'competent person' under the Regulatory Reform (Fire Safety) Order 2005.

The development and implementation of a rolling programme of fire risk assessments as required by the Regulatory Reform (Fire Safety) Order 2005.

Provision of advice to the University concerning appropriate standards for fire precautions in buildings and the development and maintenance of effective fire prevention strategies.

Development of compliance and control strategies as required by the relevant statutory provisions.

Monitoring Departmental and University fire safety arrangements and making recommendations as necessary.

The University Fire Safety Lead will be responsible to the Director of Health, Safety and Wellbeing.

3.13 The Director of Estates and Facilities Management

In addition to the general responsibilities allocated to Deans and Directors of Professional Services, the Vice Chancellor and Chief Operating Officer COO have delegated additional responsibilities to the Director of Estates and Facilities Management (E&FM) for health & safety and compliance. These are in relation to buildings, grounds and facilities on the Loughborough Campus and for the London Campus through the contracted facilities provider.

As such, the delegated responsibilities of the Director of E&FM include, so far as is reasonably practicable:

- Ensuring that buildings, grounds and facilities are maintained to a safe standard.
- Ensuring that management systems and responsibilities are clearly defined, implemented and monitored to assure compliance, for the provision of a safe estate infrastructure, including new builds, refurbishments, electrical, fabric and mechanical, services, roads, footways and external areas. (this excludes responsibility for research and educational equipment provisioned by schools)
- Ensuring that the University's responsibilities under the Construction (Design and Management) Regulations 2015 are met and that construction and refurbishment projects meet the health and safety needs of the University.
- Ensuring that written agreements which identify statutory obligations, roles and responsibilities, are in place and complied with for University-owned buildings which are leased.
- Having management arrangements in place and records to show that statutory requirements are met. whether that be as owner-occupied i.e. LU owned and occupied building or, as landlord for buildings let to third parties.

- Ensuring that management systems are in place to monitor/evidence statutory compliance of landlords in commercially-owned premises not owned by the University, but in which we place University staff or students.
- Acting as the Duty Holder as required by specific University policies by nominating and appointing DAPs for compliance related tasks.

Should the Director of E&FM be aware of areas of risk outside these delegations or be unable to provide assurance of safe standards, these matters will be escalated and passed back to the Chief Operating Officer and / or Vice Chancellor.

3.14 Director of Human Resources

The Director of Human Resources is responsible for ensuring appropriate measures are in place to monitor workplace sickness levels. Where these monitoring systems indicate work-related ill health issues, these will be brought to the attention of the Health and Safety Service.

3.15 School / Departmental Safety Officers

Either a School Safety Officer or individual Departmental Safety Officers shall be appointed by the Dean or Head of Professional Service to act for their respective Departments. The School *I* Departmental Safety Officer will report to the Dean or Head of Professional Service on all health and safety related issues. (For a list of the typical duties of a School/Departmental Safety Officer, see **Appendix 2**).

When appointing persons as a School *I* Departmental Safety Officers, serious consideration should be given to the amount of time necessary to adequately carry out the associated duties and the person's existing duties. Where necessary, some or all of the person's existing duties should be transferred to another person/post.

Persons selected to be School / Departmental Safety Officers should be sufficiently experienced, be willing to accept the role and be willing and able to be trained (when necessary) to an acceptable level of competence in safety issues, relevant to their Department. They should also be of sufficient competency and experience to be able to carry out their duties with recognised authority.

3.16 All Supervisory Staff

All supervisory staff (for example Senior Academic staff, Administrative Managers, Principal Technical Managers, Team Leaders etc) will:

- Be fully familiar with the University and local Health and Safety Policy and understand and apply it within all areas of their responsibility
- Ensure staff are trained to enable them to carry out suitable and sufficient risk assessments, where required. (See **Appendix 3**; "Loughborough University Staff Training Matrix").
- Ensure that staff operate in accordance with the University and local health and safety policy, as relevant to their work
- Ensure that they and their staff are trained in the principles, operations and emergency procedures necessary for health and safety
- Ensure the competence and training of their appointees to allotted tasks

- Ensure that safe working practices within a safe working environment are used by all staff
- Ensure that all equipment used is safe and that those using the equipment are trained on its safe use.

3.17 All Employees

The Health and Safety at Work etc Act 1974 states that **EVERYONE** has a responsibility for safety. It is important that everyone appreciates the extent of their responsibilities, namely, that they:

Shall make themselves familiar with the Health and Safety Policies of the University and of the School/Departments in which they are employed, and shall be fully familiar with sections of these policies which directly affect their particular activities

Shall accept individual responsibility:

- to take all reasonable care for the health and safety of themselves and of any other person who may be affected by their acts or omissions
- to co-operate with the University so far as is necessary to enable it to comply with its legal duties
- to undertake as required all health and safety training which is deemed necessary by their line manager to secure the health, safety and welfare of their employees or anyone else affected by their actions while at work

Shall report to supervisory staff any occupational ill-health issues/accidents/incidents or dangerous occurrences, whether or not injury is sustained, and any unsafe practices; and shall report systems of work or conditions which they consider may create risks to their own health and safety or damage to equipment and premises

Shall not, intentionally or recklessly, interfere with or misuse anything provided by the University in the interests of health, safety or welfare

Shall conform to all instructions, written and oral, given to ensure their personal safety and the safety of others.

Shall at all times make full use of appropriate personal protective clothing and appropriate safety equipment and devices provided.

Shall maintain tools and equipment in good condition, reporting any defects to their supervisor.

3.18 All Students

All students:

Shall at all times, whilst they are on University premises or taking part in University activities, follow the Health and Safety Policy and comply with any health and safety instructions given to them. The same responsibility will be placed on students by Loughborough Students' Union The University and Students' Union will work together to ensure that the policies and instructions are communicated and consistent wherever possible.

Shall not, without the consent of the member of staff in charge of the areas or activity,

introduce any equipment for use on University premises, alter any fixed installations, alter or remove health and safety notices or equipment, or otherwise take any action which may create hazards for persons using the premises or employees of the University

Shall at all times, whilst in residence in University property, comply with all fire, safety and security procedures as laid down in the conditions of residence

Shall not, intentionally or recklessly interfere with or misuse anything provided by the University in the interests of health, safety or welfare

Shall conform to all instructions, written and oral, given to ensure personal safety and the safety of others

Shall use protective or specialist clothing as required and shall use all safety equipment available

Shall maintain tools and equipment in good condition, reporting any defects to their supervisor

Shall report all occupational ill-health issues/accidents/incidents, whether or not injury is sustained, to their supervisor or the member of staff in charge of the activity or facility.

4. Implementation of University Health and Safety Policy

This section provides details of the implementation of the University Health and Safety Policy.

4.1 The Health, Safety and Environment Committee

The terms of reference of the University Health, Safety and Environment Committee are:

To act on behalf of, and to advise, Senate and Council and senior management on matters of health, safety and environmental policy, structure and communications; and to recommend any action necessary to ensure the health and safety of staff, students and members of the public (including contractors and visitors to University premises);

To develop and agree the strategic approach to be adopted in relation to Health, Safety, Environmental and Sustainability management:

To receive and act on reports, both written and verbal, on the health, safety and environmental performance and plans of schools and professional services:

To keep under review the University's legal and statutory obligations with regard to health, safety and environmental regulation compliance and to identify through regular monitoring and bring to the attention of senior management and/or Senate and Council areas where compliance is at risk or not being achieved;

To receive reports on health and safety and environmental audits, accident statistics, communications with enforcing authorities, and from relevant sub-groups, and to make recommendations to relevant University management of any corrective action required; To receive aggregated absence statistics and reasons for such absences on a similar basis; Specifically, to receive reports from sub-committees which have been established to ensure compliance with legal requirements; e.g. the Radiological Protection sub-committee: Where appropriate to seek out and promote areas of good practice;

To receive updates on changing legislation and to review and assist in the development of policies and procedures to enable the University to meet all statutory requirements; To ensure all levels of University management are aware of their safety and environmental obligations and through the receipt of regular monitoring reports to ensure these obligations

are being discharged appropriately;

To set up and oversee sub-groups of the Committee and to commission reports from these sub-groups as is necessary to assist the Committee in the development of policy and procedure. To produce terms of reference for environmental management and sustainability sub-group(s) of the Health, Safety and Environment Committee;

To monitor staff training and development programmes as they relate to health, safety and environmental issues to ensure appropriate training is provided to enable all managers safely to discharge their duties;

To receive reports and review personal safety for staff, students and visitors on University premises, particularly where it could impinge on health and safety;

To receive reports on the progress of the University Environmental Management System; To report after each meeting to Senate and Council on health, safety and environmental activities and provide Senate and Council with the information required to discharge their duties under the Health and Safety at Work Act (1974), the Management of Health and Safety at Work Regulations (1999) and the Register of Environmental Legislation.

Composition of the Health Safety and Environment Committee is attached as Appendix 1.

4.2 University Ethical Advisory Committee

From time to time the University Ethical Advisory Committee will deal with proposals for activities which have health and safety issues associated with them. To ensure good communications and to avoid issues falling between two committees a member of the University Health, Safety and Environment Committee will sit on the University Ethical Advisory Committee. Similarly, a member of the University Ethical Advisory Committee will be requested to serve on the University Health, Safety and Environment Committee.

4.3 Academic and Professional Services Health and Safety Structures and Policies

For the purposes of health and safety management any subsidiary of Loughborough University or any company in which officers of Loughborough University may be legally regarded as the 'controlling mind', will be regarded as a 'Department' under this policy document.

The Head of Department is responsible to the Dean of School or relevant member of the Academic Leadership Team for the day-to-day management of health and safety issues in their areas of managerial responsibility. See also: **Section 3, Statement of Responsibilities.**

The Director or Head of Professional service will have a defined line management structure and duties (but not responsibility) can be delegated through the line management structure.

The primary vehicle for all Health, Safety matters is likely to be a School / Departmental Health and Safety Committee. The Departmental Health and Safety Committee may or may not be formally constituted, depending upon the size and nature of the work of the Department.

It is a formal requirement of the University Health and Safety Policy that all Departments have a designated Departmental Safety Officer; the duties of the Departmental Safety Officer being appropriate to the size and activities of the Department.

Schools *I* Departments are required to formulate health and safety policies, intended to produce a safe working environment and to support and encourage staff to adopt safe working practices. This policy must reflect the University Health and Safety Policy and explain in practical terms how it will carry out the responsibilities placed upon it by the University Health and Safety Policy. (See also: **Section 3, Statement of Responsibilities).**

School *I* Departmental Health and Safety committees and the Departmental Safety Officers, who report to the Head of Department, will oversee health and safety matters within that area; liaising with the Director of Health, Safety and Wellbeing as required.

4.4 Tenants, Contractors and Partnerships

It is the responsibility of those University officers entering into any arrangement or agreement on behalf of Loughborough University to ensure all health and safety responsibilities are clearly specified as an integral part of the arrangement. This must include arrangements for two-way communications of hazard identification, risk assessments and emergency procedures; particularly for activities on campus.

Where University staff will be working under the control of external agencies their line manager will be responsible for ensuring that a satisfactory assessment of all foreseeable risks has been carried out prior to the commencement of the activity.

5. Further Reading

5.1 University Safety and Health Association (USHA) Leadership and management of health and safety in higher education institutions

6. Document Management Table

| Version | Owner | Revised by | Summary of revision | Date of revision |
|-----------|-------|------------|---|------------------|
| Version 1 | UH&SS | UH&SS | | Dec 2006 |
| Version 2 | " | " | | Oct 2009 |
| Version 3 | n | ** | Update to reflect new University management structure | Oct 2011 |
| Version 4 | " | " | Training matrix inserted | Feb 2014 |
| Version 5 | п | 0 | Changes to job titles, Update of training matrix and inclusion of Departmental and School safety officer training matrix | Jan 2017 |
| Version 6 | " | " | Changes to reflect the revised Health, Safety and Environment Committee structure and the new lonising Radiation Regulations 2017 Removal of Head of Department duties and alignment of Dean and Director of Professional Services duties | June 2018 |
| Version 7 | ii. | et. | Changes to reflect the dissolution of the Health, Safety and Environment Consultative Committee | November 2019 |

| Version 8 | UH&SS | UH&SS | Minor modifications to reflect changes in Vice Chancellor and in job titles | October 2021 |
|-----------|-------|-------|---|--------------|
| | | | | |

| Version 9 | UH&SS | UH&SS | Changes to reflect changes in the University structure. Removal of responsibilities allocated to ALT and updating of job titles. Inclusion pf specific responsibilities for the Director of Estates and Facilities Management | January 2023 |
|------------|-------|-------|---|----------------|
| Version 10 | UH&SS | UH&SS | Changes to reflect changed job titles and inclusion of specific responsibilities for the Deputy Vice Chancellor | September 2025 |

Appendix 1 Composition of the University Health, Safety and Environment Committee

The membership of the committee is as follows: -

Chair: - Deputy Vice-Chancellor
Chief Operating Officer
Deputy Chief Operating Officer
A Dean selected on a rotating basis
A Head of Operations selected on a rotating basis
Two Lay members, one of whom shall be a member of Council
Student Union Representative
One representative from each of the recognised Trades Unions (3 in total)

Ex officio members

Director of Health, Safety and Wellbeing Sustainability Manager Human Resources Director

Appendix 2 Typical Duties of School/ Departmental Safety Officers

- Undertake health and safety training to an appropriate level of competence, thus enabling them to discharge their duties. (See Appendix 4 for guidance)
- Be fully familiar with the University's Health and Safety Policy and assist the Dean to develop, implement and periodically review a local policy and procedures.
- Provide health and safety advice to the Dean and other members of staff.
- Undertake regular health and safety inspections (with Trades Union Safety Representatives, as necessary) and report findings.
- Ensure that occupational ill-health issues/accidents/incidents and near misses are reported and investigated (with direct involvement as necessary). Communicate findings of investigations and ensure that recommended action is carried out.
- Ensure the necessary provision of health and safety training (including induction) to staff
 within the School/Department either by direct involvement or by monitoring provision. (See
 Appendix 3; "Loughborough University Staff Training Matrix").
- Disseminate health and safety information and reports to appropriate staff and students.
- Monitor that adequate precautions are taken in relation to any special hazard in or about to be introduced into the School / Department, with advice from the University Health and Safety Service where appropriate.
- Monitor that all plant, equipment and processes within their area are maintained in a safe condition and in compliance with appropriate statutory requirements.
- Maintain adequate health and safety records where appropriate.
- Monitor housekeeping within the School *I* Department to ensure that a high standard is maintained.
- Monitor that adequate, suitable protective clothing and equipment is available and used as required.
- Ensure that systems are in place to provide and maintain adequate first aid facilities.
- Monitor that safe working practices based on risk assessment are adopted, especially for postgraduate work (in view of the fact that postgraduate students generally work without direct supervision).
- Act with the delegated authority of the Dean on health and safety matters of urgency. participate in audits carried out by the University Health and Safety Service as necessary.

Appendix 3 University Staff Training Matrix Staff Training Matrix (Key: M = Mandatory/ RA = Risk Assessed)

| Staff Categories | Health and Safety Induction | Accident & Near Miss Reporting | Asbestos Awareness E-Learning | Bio Safety Awareness | Bio Safety for Laboratory Workers | Chemical Safety for Lab Users Modules 1-4 | Construction Small Works | COSHH Awareness | COSHH Risk Assessment | COSHH Spill Management | DSE Assessor Course & Software | DSE Healthy Working Online | Emergency First Aid | Fire Extinguisher User | Fire Marshal Awareness | Fire Safety Awareness - Online | First Aid at Work Beginner/ Requalification | Ionising Radiation Legislation & Protection | IOSH Managing Safely | Laser Safety Awareness | Management & Risk Assessment of Manual Handling Operations | Manual Handling Safe Lifting Techniques | Mental Health First Aid | NEBOSH NGC | Radiation Protection Supervisors Course | Risk Assessment Awareness | Security Threat Awareness | Workplace Noise Risk Assessment |
|--|-----------------------------|--------------------------------|-------------------------------|----------------------|-----------------------------------|---|--------------------------|-----------------|-----------------------|------------------------|--------------------------------|----------------------------|---------------------|------------------------|------------------------|--------------------------------|---|---|----------------------|------------------------|---|---|-------------------------|------------|---|---------------------------|---------------------------|---------------------------------|
| All Staff | M | RA | | RA | | | | | | | | RA | RA | | RA | M | RA | | | | | RA | | | | RA | RA | RA |
| Academic Supervisors/ Research Associates | | | | | RA | RA | | RA | RA | RA | | RA | RA | | | | RA | RA | RA | RA | RA | RA | | | | RA | | RA |
| Bio Workers | | | | M | | RA | | RA | RA | RA | | | | | | | | | | | | | | | | | | |
| Deans & Heads of Operations | | | | RA | | | | RA | | | | M | | | | | | | RA | | | | | RA | | RA | | |
| DSE Assessors | | | | | | | | | | | М | M | | | | | | | | | | | | | | | | |
| Facility Managers | | | М | RA | RA | RA | M | RA | RA | RA | | RA | | RA | RA | | | RA | RA | RA | RA | | | | | M | | |
| Heads of Departments/ Support Services | | | | RA | | | | RA | | | | M | | | | | | | RA | | | | | RA | | RA | | |

| Staff Categories | Health and Safety Induction | Accident & Near Miss Reporting | Asbestos Awareness E-Learning | Bio Safety Awareness | Bio Safety for Laboratory Workers | Chemical Safety for Lab Users Modules 1-4 | Construction Small Works | СОSHH Awareness | COSHH Risk Assessment | COSHH Spill Management | DSE Assessor Course & Software | DSE Healthy Working Online | Emergency First Aid | Fire Extinguisher User | Fire Marshal Awareness | Fire Safety Awareness - Online | First Aid at Work Beginner/ Requalification | Ionising Radiation Legislation & Protection | IOSH Managing Safely | Laser Safety Awareness | Management & Risk Assessment of Manual Handling Operations | Manual Handling Safe Lifting Techniques | Mental Health First Aid | NEBOSH NGC | Radiation Protection Supervisors Course | Risk Assessment Awareness | Security Threat Awareness | Workplace Noise Risk Assessment |
|---------------------------------|-----------------------------|--------------------------------|-------------------------------|----------------------|-----------------------------------|---|--------------------------|-----------------|-----------------------|------------------------|--------------------------------|----------------------------|---------------------|------------------------|------------------------|--------------------------------|---|---|----------------------|------------------------|---|---|-------------------------|------------|---|---------------------------|---------------------------|---------------------------------|
| Laser Safety Officers | | | | | | | | | | | | | | | | M | | | | M | RA | | | | | | | |
| Maintenance Staff | | | М | RA | | | | M | | RA | | | RA | М | | | RA | | RA | | | M | | | | | | RA |
| Mental Health First Aiders | | | | | | | | | | | | | | | | | | | | | | | M | | | | | |
| Radiation Protection Supervisor | | | | | | | | | | | | | | | | | | | | | | | | | М | | | |
| Radiation Workers | | | | | RA | RA | | RA | RA | RA | | | RA | | RA | | | M | | | | | | | RA | | | |
| Security Staff | | | | M | | | | RA | | M | | | | | M | | М | | RA | | | M | | | | | М | |
| Sub-Wardens | | | | RA | | | | | | | | | M | | M | | | | | | | | | | | | | |
| Technicians | | RA | М | | RA | RA | | RA | RA | RA | | | | RA | RA | | | RA | RA | RA | RA | M | | | RA | RA | | RA |
| Wardens | | | | RA | | | | RA | | | | | | | M | | М | | | | | | M | | | | | |

Health, Safety and Environment Committee



Terms of Reference and Composition of HSE Committee's Sub-Committees for 2025/26

Origin: Secretary

Action Required:

(i) To APPROVE the updated terms of reference and constitution of the following sub-committees:

GM/Biosafety Committee

Health Safety Environment Statutory Compliance Sub-Committee

Non-Ionising Radiation Protection Committee

(ii) To NOTE the unchanged terms of reference and constitution of the following sub-committees:

Chemical Safety Committee

Radiological Protection Committee

Changes appear in red

(i) To APPROVE the updated terms of reference and composition of the GM/Biosafety Committee on the recommendation of that Committee.

GM/Biosafety Committee

Purpose

The purpose of the committee is to comply with the GMO (CU) regulations requirement for a genetic modification safety committee to approve risk assessments for GM class 2 activities and above.

Committee Membership

Chair

Designated Individual (DI) of the HTA licence

Representation from:

Estates and Facilities Services Management

School of Aeronautical, Automotive, Chemical and Materials Engineering

School of Architecture, Building and Civil Engineering

School of Design and Creative Arts

School of Science

School of Sport, Exercise and Health Sciences

STEMlab

University Health and Safety Service

Wolfson School

Secretary

Optional Attendees:

Director of Health and Safety Service

Environmental Manager

Representation from Occupational Health Service

Local Exhaust Ventilation (LEV) Duty Assigned Person (DAP)

Terms of Reference

Provide a forum for discussion and collaboration on best practice surround biological safety and working with GMOs.

Peer review risk assessments and aid in the classification of genetic modification work.

Provide comment on policy, guidance documents and protocols involving biological and GMO work.

Review incident trends and patterns involving biological and GMO work and share lessons learnt.

Review trends in biological safety audits and share best practice.

Receive feedback from the HTA committee via the DI on matters relating to biological safety.

Advise the Health, Safety and Environment Committee on biological and GMO matters.

Review these terms of reference every three years, or if significant changes occur.

Fixed Agenda Items

- 1. Minutes/Actions from previous meeting
- 2. Matters arising from the minutes
- 3. Update from the University Health and Safety Service
 - a. Regulatory updates
 - b. Strategic updates
 - c. Central H&S updates
 - d. Trends in audit results
 - e. Trends and lessons learned from incidents, accidents and near-misses
- 4. Updates from Schools and Services
- 5. GM Risk assessments
- 6. AOB

Frequency of Meetings

The GM/Biological Safety Committee will meet three times a year. Additional meetings will be held if required.

Risk assessment approval process

GM risk assessments should be sent to the committee for feedback. Committee members will be given two weeks to provide feedback on the risk assessment. The UHSS will review all comments and suggest to the committee that the risk assessment should be:

- Approved and a signed copy sent to the originator.
- Returned to the originator with request for further information and/or minor changes.
- Returned to the originator with major changes.

The originator can re-submit a risk assessment for approval once changes have been implemented.

Health, Safety, Environment Statutory Compliance Sub-Committee Meeting

1 Definition of a DAP

A person, either employed by the University or another organisation, with the required knowledge, training and experience, appointed by the Director of Estates in writing, to take managerial responsibility for the implementation of the policy and procedures for a specific area of Health and Safety legislation

Mike Haynes-Coote

2 Membership

University Health, Safety and Risk Manager

Director of Maintenance, Engineering and Sustainability Rob Sparks

University Compliance Engineer and DAP Asbestos Deputy Paul Walker

DAP Gas Jonathan Cripps

DAP HV Electrical Adam Slater

DAP LV Electrical vacancy

DAP F Gas Nik Hunt

DAP Fire James Holt

DAP LEV Michael Wraight

DAP LOLER Dave Green

DAP PUWER Carolyn Kavanagh

DAP Pressure Systems Matthew Polkey

DAP Food Hygiene Gagan Kapoor

DAP DSEAR Oliver Preedy

DAP Water Scott Phillips

Secretary Mya Ghataurhae

Right of Attendance:

Director of Estates and Facilities Management Graham Howard

3 Terms of Reference

- To advise Health, Safety and Environment Statutory Committee on compliance across the University relating to facilities in line with the University Health and Safety policies.
- To receive feedback and support from Health, Safety and Environment Statutory Committee.
 The Committee to feedback suggestions and recommendations to the chair who can advise DAPs at future meetings.
- To monitor adherence to Governance structure for Health and Safety compliance management.
- To ensure an appropriate audit programme of statutory activities exists.
- Governance of compliance in relation to topics listed below to a schedule agreed. All DAP's will provide a verbal update on their action trackers lasting 5-10 Mins:

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- 1. Asbestos
- 2. HV Electrical installation
- 3. LV Electrical installation
- 4. Water hygiene
- 5. Local Exhaust Ventilation Systems (LEVs) Updated 14.01.21
- 6. Lifting equipment LOLER
- 7. Pressure systems
- 8. Gas
- 9. Fire safety
- 10. F-Gas Environment
- 11. PUWER
- 12. Food Hygiene
- 13. DSEAR

4 Meetings

- Meetings will occur every 4 months prior to the University Health Safety Environment
 Statutory Committee (HSESC) meetings
- This meeting will feed directly into the HSESC meetings and minutes will be forwarded to the secretary
- The disbandment of the previous Health Safety Environment Sub-Committee meeting has
 resulted in a loss of representation of School Deans present in this meeting. It was agreed
 that representatives from Schools or Prof Depts can be invited to this Health Safety
 Environment Statutory Compliance Sub-Committee meetings if specific DAP areas are
 reviewed in detail

Non-Ionising Radiation Protection Committee

1.0 Purpose

The role of this committee is to advise, approve policies and guidance documents surrounding the safe procurement and use of equipment producing non-ionising radiation.

2.0 Governance structure

The university safety management structure is outlined below the organisational structure is outlined in figure 1.

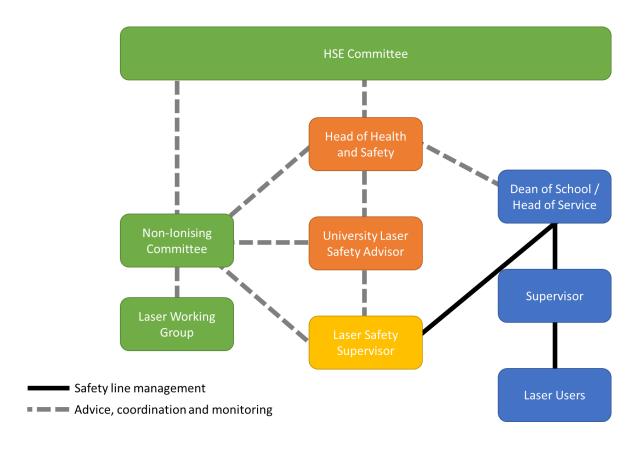


Figure 1: Laser safety organisational structure with responsibilities indicated.

3.0 Terms of Reference

- Identify the risks on campus from Non-Ionising Radiation and the associated risk owners
- Review information and ensure that adequate discussion takes place to ensure appropriate control measures and containment is in place regarding the use of equipment producing non-ionising radiation
- Review policy, guidance documents and protocols to ensure compliance to all relevant non-ionising radiation legislation
- Peer review risk assessments if needed
- Review Audits undertaken across the relevant areas within Schools.
- Ensure systems and procedures align accordingly with university policies
- Report to the Health, Safety & Environment Committee

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4.1

3.1 Composition of the Committee

| Committee Member | School/Professional Service | Position |
|------------------|---------------------------------|---------------------------------|
| Claudia Eberlein | School of Science | Chair |
| | Health and Safety Service | Secretary |
| Marco Peccianti | School of Science | University Laser Safety Officer |
| | | |
| Julie Turner | Health and Safety Service | |
| Oliver Preedy | Health and Safety Service | |
| Rae Denham | Health and Safety Service | |
| | | |
| Craig Brown | School of Design and Creative A | Arts |
| Matthew Casey | School of Sport Exercise and He | ealth Sciences |
| Joanna Bullard | School of Social Science and H | umanities |
| Sarah Wappat | School of Social Science and H | umanities |
| Sean Atherton | School of Science | |
| Mark Brend | School of Aeronautical, Automo | tive and Materials Engineering |
| Simon Tuplin | School of Aeronautical, Automo | tive and Materials Engineering |
| Keven Smith | Wolfson | |
| Kevin Bass | Wolfson | |
| Mark Capers | Wolfson | |
| Long Chen | School of Architecture Building | and Civil Engineering |

3.2 Fixed Agenda Items

- 1. Minutes/Actions from previous meeting
- 2. Matters arising from the minutes
- 3. Update from the University Laser Safety Officer
- 4. Regulatory updates
- 5. External audits
- 6. Internal audits
- 7. Incidents/Accidents and Near misses

(ii) To NOTE the Terms of Reference and Constitution of its sub-committees where these have not changed:

Chemical Safety Committee

Remit

The role of this committee will be to advise and approve policies and guidance documents surrounding the safe procurement, handling, storage and disposal of chemicals.

Chemicals are defined as any substance hazardous to health or which has the potential to be hazard to health.

This does include materials covered in the specific remit of the other HSEC sub committees biological, radiation and fire.

Terms of Reference

- To advise the Health, Safety and Environment Committee on Chemical Safety and the associated statutory duties identified in the Chemical Safety Policy
- Consider and review the operation of the Chemical Safety Policy and receive reports from Schools or Professional Services on chemical safety.
- Review guidance documents and protocols to ensure compliance to all relevant chemical safety legislation
- Review chemical risk assessments from School Safety Officers where further advice/expertise is required
- Review Chemical Safety Audits undertaken across the relevant areas within Schools and Professional Services.

Current Membership

Sarah Wappat

| • | | |
|-----------------|----------------|-------------------------|
| Helen Willcock | AACME | Chair |
| To be confirmed | H&S Service | Secretary |
| Julie Turner | H&S Service | Chemical Safety Officer |
| Luke Wilkinson | SoS | |
| Oliver Preedy | H&S Service | DAP for DSEAR |
| Tony Goodall | SSEHS | |
| James Holt | H&S Service | Fire Safety Officer |
| Nik Hunt | Sustainability | Environment Manager |
| Chris Harris | STEMLab | STEM building Manager |
| Michael Wraight | FM | DAP for LEV |
| | | |

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SSH

Keven Smith Wolfson

To be confirmed ABCE

Sean Creedon AACME

Rachael Redford/Craig Brown SDCA

Jake Bowers CREST

Jimmy Wright SDC

To be confirmed Wolfson

Simon Kondrat SoS

Optional Attendees

Rob Sparks E&FM

Sarah Van Zoelen Occupational Health

Fixed Agenda Items

- 1. Minutes/Actions from previous meeting
- 2. Chemical Safety Culture
- 3. Communication/Best practice and Progress
- 4. Regulatory updates
- 5. Fire safety update
- 6. Centralised chemical safety audits
- 7. Hazardous waste
- 8. Incidents/Accidents and Near misses involving chemicals

Radiation Protection Committee

Membership and Terms of Reference for Radiation Protection Sub-Committee

The members of the committee shall consist of:

- Chief Operating Officer (permit holder)
- University Radiation Protection Officer and Radiation Protection Team
- RWA (if different to above)
- Radiation Protection Supervisors who shall be members of staff in Schools/Departments working with ionising radiations, nominated by their Dean of School and appointed by the University Chief Operating Officer
- Occupational Health Advisor
- University Health, Safety & Risk Manager
- Facilities H&S representative
- A secretary who shall be a member of the administrative staff of the University

Terms of Reference

- The Radiological Protection Sub-Committee shall monitor health aspects and control of ionising radiations and radioactive materials within the University.
- It shall be responsible for establishing protocols and procedures for the management of radioactive materials and wastes under the terms of the University's Authorisation from the Environment Agency.
- The Sub-committee is responsible for drafting local rules for approval by Council and for ensuring that these regulations are enforced.
- Meetings are held 3 times a year with further meetings as necessary.
- It shall report to Council yearly through the Radiation Protection Officer.