

19 May 2026 HSE Agenda (SAF26-A2)

MEETING

19 May 2026 14:00 BST

LOCATION

Pearce Committee Room 201.0.09, Hazlerigg Building

PUBLISHED

13 May 2026

Agenda

Location		Date	Time	
Pearce Committee Room 201.0.09, Hazlerigg Building		19 May 2026	14:00 BST	
Item	Owner	Time	Page	
Section A - Items for Discussion				
1	Business of the Agenda	Chair	14:00	-
1.1	Members should notify the Secretary by midday on Monday 18th May if they wish to speak to a starred item			-
2	To CONFIRM the minutes of the meeting on 28th January 2026	Chair		4
3	To NOTE actions arising from previous meetings	Chair		12
4	To RECEIVE a critical risk update on the University's Student Suicide Prevention Strategy	Charlie Wheeldon	14:10	19
5	To RECEIVE a critical risk update on the risks posed by construction and contractor activity on campus	Martin Channell	14:30	-
6	To RECEIVE an update regarding the Terrorism (Protection of Premises) Act 2025 (Martyn's Law)	Ant Dales	14:50	35
	BREAK		15:00	-
7	To CONSIDER progress in implementing the Health and Safety Planning and Review Process and a recommendation to continue with the process in 2027	Neil Budworth	15:10	37
8	To NOTE progress and to CONSIDER the method for sharing School and Professional Service HSW plans going forward	Neil Budworth	15:20	40
9	To NOTE the new format accident and incident report for Schools and Professional Services	Neil Budworth	15:30	43
10	To CONSIDER the updated plan of key business for forthcoming meetings	Neil Budworth	15:40	58
11	To RECEIVE a Consolidated Health, Safety and Wellbeing Report by the Director of HSW and to NOTE areas of risk and actions identified	Neil Budworth	15:45	64
12	To RECEIVE updates in relation to Statutory Compliance Key Performance Indicators and to CONSIDER the compliance for these areas and actions set to move areas to green to ensure these are appropriate.			-
12.1	Health, Safety and Environment Statutory Compliance Sub-Committee Report	Rob Sparks		71

	Item	Owner	Time	Page
12.2	Key compliance indicators for Biological/ Chemical/ Radiation Safety and HTA Research Licence.	Rae Denham	15:55	78
13	To CONSIDER the 2025/26 Annual Compliance Assurance Statement	Neil Budworth	16:05	86
14	Arising from M26/16, to CONSIDER proposed RrAgG definitions for inclusion with future recommendations to Council.	Neil Budworth	16:15	90
	Section B - Starred Items			-
15	To RECEIVE the minutes of the following Sub-Committee meetings:			92
15.1	Chemical Safety Committee (Meetings on 10th February and 21st April 2026)			-
15.2	GM and Biosafety Committee (Meetings on 26th January and 29th April 2026)			-
15.3	Health, Safety and Environment Statutory Compliance Sub-Committee (Meeting on 16th April 2026)			-
15.4	Non-ionising Radiation Safety Committee (Meetings on 2nd February and 23rd April 2026)			-
15.5	Radiological Protection Sub-Committee (Meeting on 17th February 2026)			-
15.6	Safeguarding & Prevent Sub-Committee (Meeting on 12th March 2026)			-
16	Arising from M45.3, to NOTE the updated composition, terms of reference and membership of the new Safeguarding and Prevent Sub-Committee			138
	Section C - For Information - NONE			-
17	Any Other Business	Chair		-
18	Dates of meetings in 2026/27:			-
18.1	Wednesday 7th October at 12.30			-
18.2	Wednesday 3rd February at 14.00			-
18.3	Tuesday 18th May at 14.00			-



SAF26-M1

Minutes of the Health, Safety and Environment Committee meeting held on Wednesday 28th January 2026

Attendance

Members:

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

In attendance:

M Ashby (Secretary), Moataz Attallah and Tom Carslake for M6/3, Rebecca Cain and Julie Turner for M26/4, Ant Dales for M26/6, Sarah Van-Zoelen for M26/11 and James Holt for M26/14.

Apologies:

Rajkumar Roy, Alex Stacey-Midgley.

26/1 Minutes

SAF25-M3

The minutes of the meeting held on 8th October were APPROVED.

26/2 Matters Arising from Previous Meetings

SAF26-P1

- 2.1 Actions arising from previous minutes were NOTED and their current status confirmed.
- 2.2 Arising from M25/42.7 *HSE Update from Loughborough Sport*, Loughborough Sport was thanked for the progress made in ensuring that its staff completed the University's safeguarding training. It was asked to provide the Deputy Vice-Chancellor and COO with its completion rates using the completion rate criteria used by Audit and Risk Committee.
ACTION: Director of Sport, Acting Head of Operations
- 2.3 Arising from M25/45.3 *New Safeguarding and Prevent Committee*, the composition, terms of reference and membership of the new committee were to have been included in the HSE Committee agenda papers. However, the new committee had not yet met, so they had yet to be confirmed. The Director of Student Services would be asked for an update on planned meetings with a view to the minutes and composition, terms of reference and membership being included in the agenda papers for HSE Committee's meeting in May. **ACTION: Director of HSW**

26/3 Health, Safety and Environment Update: School of Aeronautical, Automotive, Chemical and Materials Engineering

SAF26-P2

- 3.1 The Committee RECEIVED a health, safety and environment update from the Dean and Head of Operations.
- 3.2 The following points were noted in particular:
 - (i) Plans were in place to ensure ongoing HTA compliance within the Centre for Biological Engineering.
 - (ii) Sector health and safety guidance had been embedded in the University's Student Placements, Work-based Learning and Study Abroad Health and Safety Policy.
 - (iii) Lead academics were being assigned to each lab to ensure ownership of all labs.
 - (iv) NCCAT was finalising an Explosion Protection Document which summarised the preventative measures that were in place.
 - (v) The School intended to establish an emergency team to respond to out-of-hours incidents.
- 3.3 The Committee conveyed its thanks to the Dean and Head of Operations for the update.

26/4 Health, Safety and Environment Update: School of Design and Creative Arts

SAF26-P3

- 4.1 The Committee RECEIVED a health, safety and environment update from the Dean and Head of Operations.
- 4.2 The Health and Safety Service had carried out detailed environmental monitoring of the School's 3D printing area. The Director of HSW would share the findings of the exercise with other Schools which engaged in 3D printing, and would discuss with the Dean of AACME the guidance around 3D printing environments that had been developed by another HEI. **ACTION: Director of HSW**
- 4.3 The School intended to cease its use of natural gas by replacing its gas-powered steamer and kiln with electric versions. This change would reduce running costs and allow students to gain experience of using more modern equipment.
- 4.4 A tabletop contingency plan exercise within the School had highlighted health and safety practices that were already in place and some areas for improvement. The Dean and Head of Operations had found the experience insightful and were keen to recommend the tabletop exercise to other Schools. Other Schools were encouraged to consider carrying out similar tabletop exercises with support from the Health and Safety Service. **ACTION: Health and Safety Service working with Deans and Heads of Ops**
- 4.5 The Committee conveyed its thanks to the Dean and Head of Operations for the update and commended, in particular, the significant work undertaken to improve the wellbeing of the School's staff. It also wished to thank the Head of Occupational Health and Wellbeing for the support that she had given to the School on this journey.

26/5 Critical Risk Update on the Risks Posed by Increased Construction and Contractor Activity on Campus

SAF26-P4

- 5.1 The Committee RECEIVED a potential critical risk update from the Director of Estates and FM on risks posed by increased construction and contractor activity.

- 5.2 Work to set up the site for the Central Accommodation Project (CAP) had begun earlier in January. With this and two other projects under way, the campus was very busy, and in particular around the EHB area. The Committee considered the impact of the project on the campus. Identified risks included pedestrian safety, heavy goods vehicles and plant equipment operating near public spaces, the environmental and health impact from noise and dust emissions, and access and compliance challenges.
- 5.3 Plans were in place to capture in real time the lessons learnt, such as on car parking arrangements and wayfinding signage, in order to inform future major projects on campus.
- 5.4 The work had resulted in a significant, sudden upturn of activity for the CAP project team, the Health and Safety Service and the Security Team in a short of period of time. Consideration was being given to ways of supporting them to safeguard their wellbeing. Estates and FM were redeploying an individual to support the team, and it had bid for a graduate management trainee who could provide additional support.
- 5.5 Signage had been erected to educate campus users about alternative routes across campus. In spite of this, there had been evidence of behavioural issues, with instances of individuals moving fencing to gain access through construction sites. It was felt that there was a need for more signage and for the signage to make clear the instructions for pedestrians and vehicles when routes were closed to them.
- 5.6 There was also a need for greater clarity over who in the CAP PMB was responsible for communicating with campus users, and a need for more communication, with students in particular. Consideration needed to be given to the messages being conveyed about route closures, alternative routes and potential noise. Once that had been done, the University would be in a position to take punitive action against individuals who breached the perimeter of the site and behaved inappropriately.
- 5.7 Estates and FM were asked to work with Marketing and Advancement to agree responsibility for aspects of the communication and to make the signage clearer, seeking advice from the Head of Brand, Creative and Print Services if this had not been done already. They should ensure that the signage was of a high standard, clear and readable, using the services of Print, Post and Logistics by default for this purpose. They should also ensure that the corporate comms about route closures and alternative routes were coordinated and clear. **ACTION: Director of Estates and FM**
- 5.8 Members noted areas of the campus where there were often high volumes of both pedestrians and traffic at certain times of the day. Given the imminent return of students at the start of term and concentration of car parking spaces in certain areas, the Head of Operations for Estates and FM was asked to put mitigations in place to ensure the through flow of traffic and to minimise bottlenecks. He was asked to carry out a check of the traffic flow around the temporary car park on the Ann Packer site where there was said to be a particular issue. The Head of Operations should feel empowered to take action and should seek the support of the Senior Management Team if he encountered obstacles. **ACTION: Estates and FM Head of OPS**
- 5.9 Estates and FM were also asked to explore ways to improve the pinch point of the pathway behind the Wavy Top Building such as by improving the lighting, widening it by digging into the embankment or installing hoarding. **ACTION: Director of Estates and FM**
- 5.10 The Sustainability Manager would remind the campus bus drivers of the need to keep to the campus speed limit and to be particularly cautious in coming weeks given the anticipated increase in pedestrians on campus from the start of term and the increase in the number of heavy goods vehicles on campus. **ACTION: Sustainability Manager**

26/6 Terrorism (Protection of Premises) Act 2025 (Martyn's Law)

SAF26-P5

- 6.1 The Committee RECEIVED a critical risk update from the Head of Security on measures to ensure that the University complied with the Terrorism (Protection of Premises) Act 2025. A risk management plan had been drawn up which identified areas which the University would need to focus on to ensure compliance.

- 6.2 Progress had been made since the October meeting on plans to implement the SafeZone app. The Software Risk Assessment Process was nearing completion, and the app was on schedule to be implemented, tested and ready for launch by September 2026.
- 6.3 The Committee considered whether arrangements should be in place to register all campus users, with temporary visitors being asked to scan a QR to register on a soft version of the app. It was agreed that the app should be made available to staff and students only. Tenants and contractors would be asked to use the soft version, and arrangements would continue to be put in place for third parties via risk assessments for events.
- 6.4 It was agreed that, if workable, there should be a soft launch of the app for staff by Easter. The app would then be rolled out over the summer to those students who would be continuing their studies in the 2026/27 academic year with the aim of full implementation for all students by September.
- 6.5 The introduction of the SafeZone app was currently being progressed as a management task, with updates being provided to HSE Committee. Moving forward, a group would be set up to oversee implementation of the app and messaging about its roll out and the benefit realisation and utilisation that it would bring. The group would be headed by the COO and include representation from LSU. **ACTION: Head of Security, COO**
- 6.6 A paper would be submitted to a SPaRC briefing meeting outlining the implementation timeframe and seeking approval to purchase the app. **ACTION: Head of Security**
- 6.7 The Head of Security was thanked for the considerable work to date on the project. Thanks were also expressed to IT Services colleagues for their work in assessing the app.

26/7 Update on Review of the Health and Safety Planning Pilot

- 7.1 HSE Committee received an update from the Director of HSW on progress in developing the new Health and Safety Review Process. Guidance had been issued to Deans and Directors of Professional Services earlier with a view to their submitting HSE plans for consideration at the May Meeting. A review meeting had been arranged, and templates would be issued shortly.
- 7.2 The templates would be updated to include a prompt for Schools to make reference to their environmental actions. This information would inform the sustainability element of the University's QS submission. **ACTION: Director of HSW, Sustainability Manager**

26/8 Updated Plan of Proposed Business

SAF26-P6

- 8.1 The Committee considered the plan of proposed business for forthcoming meetings. It agreed to add an update on contractor management to the business for the May 2026 meeting.
- 8.2 The Director of Student Services would be asked whether the Suicide Prevention Strategy would be sufficiently well developed for her to be able to provide a critical risk update on the Strategy at the May meeting. **ACTION: Director of HSW**

26/9 Director of Health, Safety & Wellbeing Update

SAF26-P7

- 9.1 Members RECEIVED a consolidated report from the Director of HSW on issues and actions relating to health, safety and wellbeing.
- 9.2 The following were noted in particular:
 - (i) The University Leadership Group had received health and safety training from the law firm Eversheds Sutherland.
 - (ii) The Health and Safety Service had provided the Director of Catering, Domestic and Residential Services (CDRS) with a detailed audit of potential slips, trips and falls and planned to work with CDRS to develop an action plan.

- (iii) Active management was in place for water safety, including legionella. The measures that were now in place had led to the KPI for Water Hygiene being changed from Amber to Green.
 - (iv) The Health and Safety Service was taking forward with Emerging Photonics the recommendations from a recent independent audit of laser safety standards in the area.
- 9.3 Estates and FM, and the Health and Safety Service had been liaising with Loughborough Sport over anticipated spectator numbers and the spectator barriers that would be in place for Big BUCS Wednesday in March. The spectator numbers had yet to be confirmed. The COO would seek clarification from for Loughborough Sport on the anticipated spectator numbers to inform planning for the event. **ACTION: COO**
- 9.4 The Director of Estates and FM and the Director of HSW would provide the Chair with a report by the end of February confirming that they were satisfied with the measures that would be in place to ensure spectator safety at the event. The Fire Safety Lead would take the lead in drafting the report for consideration by the two directors. **ACTION: Fire Safety Lead, Director of Estates and FM, Director of HSW**

26/10 Health, Safety and Wellbeing Annual Report and Future Plan

SAF26-P8

- 10.1 Members CONSIDERED the Health, Safety and Wellbeing Annual Report and Future Plan. The Committee was informed that substantial progress had been made during the year. The report noted the Health and Safety Service's philosophy and the issues which it intended to focus on in the coming year.
- 10.2 For the first time, accident/incident and near miss charts included rolling one-year averages and averages for the previous four years. These additions would provide a better indication of trends over time where there was seasonal variation. This approach would also be used in data provided to Schools and Professional Services for their reports.
- 10.3 The report was approved and recommended to Council. A paragraph would be added at the beginning of the report to indicate the degree of assurance that Council could take from it.
ACTION: Director of HSW

26/11 Occupational Health and Wellbeing Annual Report

SAF26-P9

- 11.1 Members CONSIDERED the Occupational Health and Wellbeing Annual Report. They were informed that the Occupational Health and Wellbeing Service (OHWS) was working hard to balance the needs of the University with the general wellbeing of its staff, whilst also looking forwards and being open to ideas of how it could improve the staff experience.
- 11.2 It was reported that the Health and Safety Executive was investigating a number of HEIs, looking specifically at stress at work and challenges over the wellbeing of employees. The University had already embedded measures to address many of the issues that had been flagged up by the Health and Safety Executive to date. However, the Committee noted that the University should not be complacent and should keep the dynamic process of support going. As an example, the OHWS planned to analyse HR data to identify groups which could receive targeted support and to provide specific risk assessment support training.
- 11.3 Members noted that the benefits of working at the University were not limited to pay and reward. Estates and FM staff (and other staff across the University) were said to value the services provided by the OHWS including access to physiotherapy when they needed it.
- 11.4 Thanks were expressed to the Head of Occupational Health and Wellbeing and her team for the excellent service that they provided to staff.

26/12 Statutory Compliance Key Performance Indicators

SAF26-P10 SAF26-P11

- 12.1 The Committee RECEIVED updates on statutory compliance key performance indicators and noted that the compliance ratings remained at either green or amber. The indicators were broadly as anticipated and provided good assurance. The exception was HTA where the six-monthly, self-inspection audits had been delayed due to staffing changes.
- 12.2 Some of the indicators, LV (Local Exhaust Ventilation), LV Electrical and LOLER, had been rated as 'amber horizontal' for some time, implying that there had not been an improvement during the recorded period. The Director of Maintenance, Engineering and Sustainability was asked to clarify why this was the case at the May meeting. **ACTION: Director of Maintenance, Engineering and Sustainability**
- 12.3 The Committee noted that the Director of HSW had been asked to make a recommendation to resolve a generic issue where the DAP role was not part of any member of staff's core responsibilities.

26/13 Radiation Protection Annual Report

SAF26-P12

- 13.1 The Committee RECEIVED the Radiation Protection Annual Report and agreed to recommend it for submission to Council.
- 13.2 The Committee expressed its thanks to the Senior Health and Safety Specialist.

26/14 Building Safety Act Compliance

- 14.1 The Committee RECEIVED a verbal update on the University's compliance with the Building Safety Act from the University's Fire Safety Lead.
- 14.2 The University had responded to a request from the Health and Safety Executive to make a submission to gain Building Test Certification for Towers. It had subsequently been asked for further information on fire safety, the building's structure, and the resident engagement strategy. The University was complying with these requirements. The resident engagement strategy was to be submitted in February, and a structural survey was being carried out ahead of submission of the structural report in May. If deemed satisfactory, the full set of documentation would be resubmitted to allow the University to gain a Building Assessment Certificate. The Fire Safety Lead was asked to check that the submission guidance had not changed before the documentation was resubmitted. **ACTION: Fire Safety Lead**
- 14.3 Following a recent visit to the campus, Leicestershire Fire and Rescue Service representatives had sought assurance on the safety of Towers and had requested information on the University's plans for future use of the building. The Committee was informed that any plans to extend the life of the building beyond 2027 would be accompanied by investment that would ensure that the University was compliant with its legal obligations. There were no plans to extend use of the building beyond this point without this additional work having been carried out first. There would be a further resubmission of necessary documentation to the Health and Safety Executive to gain an updated Building Assessment Certificate at that point.
- 14.4 Estates and FM intended to submit a proposal to SPaRC B for funding for the additional work. The proposal would include a number of costed options for work which could be carried out whilst the building was unoccupied in the summer of 2026 and, if necessary, in the summer of 2027. Subject to approval, the proposal would then progress for consideration by the Estates Management and Sustainability Committee.
- 14.5 Members noted the requirements of the residents engagement strategy which were more challenging to fulfil when residents rented rooms, rather than owning part of the property. The Fire Safety Lead was seeking advice from the Building Safety Regulator and information about another university's experience of seeking certification for a hall of residence. He was encouraged to seek the support of LSU to ensure that engagement with residents was meaningful. **ACTION: Fire Safety Lead**

14.6 The Fire Safety Lead, Director Estates and FM and Director of HSW were thanked for the important work that they were engaged in to ensure ongoing compliance with building safety regulations.

26/15 Construction – Small Works Health and Safety Policy

SAF26-P13

- 15.1 The Committee CONSIDERED proposed changes to the Construction – Small Works Health and Safety Policy.
- 15.2 Changes to the Policy included a change to the circumstances when Schools and Professional Services could deliver small works themselves. The limit had been increased from £1,000 to ‘under £10,000’ subject to the works also being non-notifiable under Construction (Design and Management) Regulations 2015 and considered low risk with only minimal impact on the building fabric or services.
- 15.3 Members were informed that some work carried out by IT Services sat outside the policy. It was subject to a different process and required separate guidance on how the works should be approached.
- 15.4 The Committee APPROVED the proposed changes on the understanding that the policy would be brought back for further consideration at the May meeting following the addition of guidance for small works carried out by IT Services. **ACTION: Director of HSW**

26/16 Risk Rating

SAF26-P14

- 16.1 The Committee CONSIDERED a recommendation by the Director of Health, Safety and Wellbeing that the University’s overall Health, Safety and Environment risk rating should remain at ‘2 Light Green - Performance is on track, data suggests no concerns’.
- 16.2 Members noted the significant issues which were listed in the paper, that is, the risk of Legionella, fire risk management, mental health and employee wellbeing, and increased construction and refurbishment activity on campus. They were informed that mitigations for these issues were either planned or in place.
- 16.3 The Committee considered the choices that were available to it in the University’s RrAgG recommendations chart and noted, in particular, the wording of the proposed ‘2 Light Green’ rating. It agreed that it was accurate to state that performance was on track. However, rather than stating ‘data suggests no concerns’ it would be more accurate to state that the risk mitigations that were in place were suitable for the risks that have been identified.
- 16.4 HSE Committee agreed to follow the example of the Finance Committee in introducing a suite of footnotes that could be seen alongside future recommendations. The footnotes would give Council a better understanding of the Committee’s interpretation of the risk level. The proposed footnotes would be considered at the May meeting. **ACTION: Director of HSW**
- 16.5 The Committee APPROVED the risk rating of ‘2 Light Green’ for recommendation to Council subject to the addition of a footnote to convey how the Committee had interpreted the scale in the context of health, safety and environment as in M16.3 above.

26/17 Incident, Near Miss and Fire Data Report

SAF26-P15

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

26/18 Minutes of Sub-Committees

SAF26-P16

The Committee RECEIVED the minutes of the following sub-committee:

Health, Safety and Environment Statutory Compliance Sub-Committee (Meeting on 15th September 2025)

26/19 Dates of Future Meetings

Tuesday 19th May 2026 at 14.00

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Health, Safety and Environment Committee



Loughborough
University

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

Completed – will be removed

Not yet completed

Meeting	Minute	Description	Action	Status
SAF24-M1	13	<u>Constitution, Terms of Reference and Membership</u> Reflect upon ways to improve Committee’s gender balance	Chair, Director of HSW	To be included in the transition to the new mode of operation and discussed at October 26 meeting.
SAF25-M1	5.5	<u>New Safeguarding and Prevent Sub-Committee</u> 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	Issues relating to under 18s to form part of the agenda for the first meeting. May 26 update: A working group specifically looking at support for U18s reporting into the Safeguarding and Prevent Working Group has been established – chaired by Head of SWAI.
SAF25-M3 SAF26-M1	45.3 2.3	Include updated composition, terms of reference and membership in the agenda papers for the February HSE meeting as a starred item.		Included in agenda papers for May 26 meeting. Completed
SAF25-M3	45.4	Raise with OD difficulties experienced in accessing reports on completion rates for safeguarding training.		OD generate weekly mandatory training reports, which include Safeguarding. The reports indicate which staff have completed <u>all</u> mandatory training and those who need to either complete or refresh their training. Reports are stored on a named School/Division basis in a WIT folder which enables Schools and Divisions to only see their own staff, a necessary GDPR requirement. Designated School/Division management staff have access to this folder and can manipulate the data to rationalise current staff against completion records.

Meeting	Minute	Description	Action	Status
SAF25-M2	33.6 & 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	Jan 26 update: LOLER and LV DAPs in place. LEV DAP role currently filled by E&FM. However, view of Director of Maintenance, Engineering and Sustainability that the role should be a School responsibility as most use of the equipment in the scope of LEV compliance is by Schools. Update to be provided at May meeting. May 26 update: Update on DAPs included in SAF26-P25 Health, Safety and Environment Statutory Compliance Sub-Committee Report
SAF25-M3	41.6	<u>HSE Update – Catering, Domestic & Residential Services</u> Review health and compliance training requirements in CDRS. Consider whether need to prioritise or take a different approach for certain groups when offering some training.	Director of HSW with OD reporting to HRC Committee	Work has started on this. There is little scope within the H&S requirements as these have been stripped back as far as possible within the bounds of legal compliance. However, it may be possible to do tailored, targeted shorter sessions on some topics for some staff. This will be progressed as quickly as resourcing allows.
SAF25-M3	42.3	<u>HSE Update – Loughborough Sport</u> Advise on ways to normalise the data to allow for year-on-year comparison and benchmarking against activity elsewhere	Director of HSW	HSW Service seeking to address this going forward.
SAF25-M3 SAF26-M1	42.7 2.2	<u>HSE Update – Loughborough Sport</u> Renew efforts to ensure that LS staff complete the University's safeguarding training. May wish to seek guidance from OD to establish whether external safeguarding training could be accepted in place of the University's own training.	Director of Sport Head of Ops for Loughborough Sport	SDC asked to provide the Deputy Vice-Chancellor and COO with completion rates using the criteria used by Audit and Risk Committee. SDC have sent this information to the Deputy Vice-Chancellor and COO.

Meeting	Minute	Description	Action	Status
SAF26-M1	4.2	<p><u>AACME Update</u> Share findings of environmental monitoring of SDCA's 3D printing area with other Schools which engage in 3D printing.</p> <p>Discuss with AACME Dean guidance around 3D printing environments that have been developed by another HEI</p>	Director of HSW	Information has been distributed and a presentation has been arranged on the methodology and results for the next Safety Officers' Forum
SAF26-M1	4.4	<p><u>AACME Update</u> Encourage Schools to carry out tabletop contingency plan exercise with support from Health and Safety Service.</p>	Health and Safety Service working with Deans and Heads of Operations	More table top exercises are being arranged. A table top exercise for the Business School is currently in preparation – the scenario has been prepared and dates are being sought.
SAF26-M1	5.7	<p><u>Risks posed by Increased Construction and Contractor Activity</u> Estates and FM to work with M&A to agree responsibility for aspects of communication and to make signage clearer, Ensure corporate coms about route closures and alternative routes are clear and coordinated.</p>	Director of Estates and FM	Management have actioned the issues working with Health & Safety
	5.8	Put mitigations in place to ensure traffic through flow for start of term. Check traffic flow around temporary car park on Ann Packer site. Feel empowered to take action and seek support of SMT if encounter obstacles	Estates and FM Head of Ops	Management have actioned the issues working with Health & Safety
	5.9	Explore ways to improve pinch point pathway behind Wavy Top Building.	Director of Estates and FM	Management have actioned the issues working with Health & Safety

Meeting	Minute	Description	Action	Status
	5.10	Remind bus drivers of campus speed limit and need for particular caution given anticipated increase in pedestrians and heavy goods vehicles on campus.	Sustainability Manager	
SAF26-M1	6.5	<u>Terrorism Act 2025</u> Set up group to oversee implementation of SafeZone app and messaging about roll out and benefit realisation and utilisation. Soft launch for staff by Easter and continuing students over Summer. Group to be headed by COO and include rep from LSU.	Head of Security, COO	PMB convened. First meeting held in February. Head of Security has proposed that PMB covers the whole Martyn's Law requirement, of which SafeZone will be just one strand. He will look at inviting stakeholders, with LSU being one of them.
	6.6	Submit paper to SPaRC briefing meeting outlining implementation timeframe and seeking approval to purchase app.	Head of Security	Paper submitted and funding agreed by SPaRC Sub-committee Completed
SAF26-M1	7.2	<u>Review of H&S Planning Pilot Update</u> templates to include prompt Schools to reference environmental actions. Information to inform QS submission.	Director of HSW, Sustainability Manager	This was included on the feedback form, but most Schools used an older version of the feedback from which omitted this. It will be included in the 2027 process from the start
SAF26-M1	8.2	<u>Future Business</u> Establish whether Suicide Prevention Strategy will be sufficiently well developed for Director of Student Services to provide critical risk update at May meeting.	Director of HSW	Update to be provided at May 26 meeting. Completed

Meeting	Minute	Description	Action	Status
SAF26-M1	9.3	<u>Big BUCS Wednesday</u> Seek clarification from Loughborough Sport on anticipated spectator numbers to inform planning.	COO	Completed
	9.4	Provide Chair with report by end Feb confirming that satisfied with the measures in place to ensure spectator safety at the event. Fire Safety Lead to take lead in drafting report.	Director of E&FM, Director of HSW, Fire Safety Lead	
SAF26-M1	10.3	<u>HSW Annual Report & Future Plan</u> Add paragraph to beginning of report to indicate degree of assurance that Council could take from it.	Director of HSW	Completed
SAF26-M1	12.2	<u>Statutory Compliance KPIs</u> Clarify at May meeting why some indicators rated as 'amber horizontal' for some time.	Director of Maintenance, Engineering and Sustainability	Explanation provided in KPI report. Completed
SAF26-M1	14.2	<u>Building Safety Act Compliance</u> Check that guidance for Building Assessment Certificate not changed before submitting documentation	Fire Safety Lead	Guidance has been continually checked, and there has been no further update to the government website guidance since 6 th Dec 24 Curtins have been appointed to support the structural assessment requirement, and this is due to be submitted this week to meet the deadline. Completed
SAF26-M1	14.5	Seek support from LSU to ensure that required engagement with residents is meaningful.	Fire Safety Lead	E&FM Head of Operations has taken the lead on the Resident Engagement Strategy. The specific points that were raised from the Building Safety Regulator were answered to meet the Resident Engagement Strategy – we await their response to this. Colleagues from E&FM, accommodation and LSU meet in the Strategic Student Accommodation Group.

Meeting	Minute	Description	Action	Status
SAF26-M1	15.4	<u>Small Works Health and Safety Policy</u> Bring policy back for further consideration at May meeting following addition of guidance for small works by ITS.	Director of HSW	To be considered at October meeting
SAF26-M1	16.4	<u>Risk Rating</u> Propose footnotes to be seen alongside future recommendations, for consideration at May meeting.	Director of HSW	Proposed footnotes included in agenda papers for May meeting. Completed

**HSE Health, Safety and
Environment Committee**



**Loughborough
University**

Report on the progress of implementing the Health and Safety Planning and Review Process

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

Action Required:

To note progress and to consider a recommendation to continue with the process in 2027

Executive Summary

The new health and safety planning and review structure has been implemented over the last 18 months. During the period of 1st April to the 5th May 2026 the plans for the higher risk schools and professional services have been subject to peer review.

This process has been effective in driving engagement and in ensuring that all high risk areas have comprehensive plans in place.

Other Committees Consulted

None

Equality Diversity and Inclusion Considerations

All plans contain a well being element, which may be related to EDI characteristics.

Detailed report

Between 1st April and the 5th May the Health, Safety and Wellbeing plans were reviewed by peer review panels.

The plans assessed were, for professional services, Marketing and Advancement, Loughborough Sport, Estates and Facilities Management and Estates and Facilities Management Catering Domestic and Residential Services. In terms of Schools that were assessed they were AACME, ABCE, Wolfson, SSH, SDCA, Science and SSEHS.

The Deans and Directors of professional services were asked to present their plans without the support of the relevant Head of Operations. This worked well and helped to ensure that senior colleagues were fully engaged in the risk identification and planning process. In some cases having senior colleagues directly involved also drove a number of conversations within the school or service which have provoked action.

Whilst there were actions identified across each school or service, some overarching concerns were identified and following the peer reviews Finance colleagues were asked to set out the international travel process at the HSE committee in October. In addition an on line on demand resource is being prepared to help senior colleagues support those who are in extreme distress without putting themselves in harm's way. The arrangements for laser safety will also be considered by the HSE committee at a future meeting. Additional actions were also agreed concerning stress risk assessments and the associated training.

When the review process proforma was developed, it was envisaged that if a school or service already had a plan then they would simply reference the relevant plan sections to show that the essential criteria had been addressed. However, without exception schools and services used the proforma as a planning tool.

Whilst this was quite effective, the form was not structured to include milestones and timelines. If the use of this form is to continue then this will need to be addressed for 2027.

Overall the process has worked really well with all higher risk areas now having written plans which cover the most important elements of effective health, safety and wellbeing management. The process has driven engagement and the quality of the plans submitted has improved as the process has rolled out. Whilst Deans and Directors have always been

supportive of Health, Safety and Wellbeing, the targeted nature of this process has meant that they needed to understand more of the detail of how things were addressed and this level of interest in itself has driven improvements.

The recommendation is to continue this process in 2027.

Neil Budworth

Director of Health, Safety and Wellbeing

May 2026

**HSE Health, Safety and
Environment Committee**



**Loughborough
University**

Consideration of Schools and Service Health and Safety Plan

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

Action Required:

To NOTE progress and to CONSIDER if/how the Committee should see the Health, Safety and Wellbeing plans going forward

Executive Summary

Given the significant volume of material involved, HSE Committee is asked to consider how it would like to approach the consideration of the Health and Safety plans provided.

Other Committees Consulted

None

Equality Diversity and Inclusion Considerations

All plans contain a well being element, which may be related to EDI characteristics.

Detailed report

Between 1st April and the 5th May the Health, Safety and Wellbeing plans were presented to and reviewed by peer review panels.

When the review process proforma was developed, it was envisaged that if a school or service already had a plan then they would simply reference the relevant plan sections to show that the essential criteria had been addressed. However, without exception schools and services used the proforma as a planning tool.

One of the results of this is that rather than a short proforma which could be easily reviewed by HSE committee, many of the forms stretch to a significant number of pages. One plan for example is in excess of 40 pages. It was not felt reasonable to include all of this material in the HSE Committee meeting pack. Equally it did not seem reasonable to include no information given HSE Committee's role in assuring the Health and Safety Standards across the University.

HSE Committee are asked to consider how, or if they it would like to see this information.

For this meeting the plans have been made available via the following link and the overarching issues identified will be presented.

School and Professional Service Plans

HSE Committee may choose to review plans in the pack for one meeting, have them spread in batches through the 3 meetings, or accept that the review process has occurred and accept the results of that process.

The overall findings of the processes included:-

- there was a lack of clarity around the international travel process where the individual was travelling to higher risk areas
- Senior colleagues sometimes had to deal with colleagues who were extreme distress and would welcome guidance / training which could be accessed as needed.

- There was some concern about the consistency of risk assessment review processes
- Processes for onboarding research groups in terms of chemicals and equipment were in need of attention.
- There were some discussions around electronic risk assessment and chemical inventory systems, but there was no active desire to pursue these options.
- Not all Senior Leadership Teams were involved in the development of the Health, Safety and Wellbeing plan.
- The Health and Safety risk register broadly underpinned all of the plans.

Other observations :-

Some schools have very well developed structures and approaches to planning with Science being the most obvious example. Other schools were managing with a more minimalistic structure. Some benchmarking may be helpful.

Most of the plans lacked timelines and milestones. This may be due to the use of the reporting proforma as a planning tool – this will be addressed for 2027.

Wellbeing is the weakest element of all of the plans

Neil Budworth

Director of Health, Safety and Wellbeing

May 2026

Health, Safety and Environment Committee



Loughborough
University

Director of Health, Safety and Wellbeing's Report

Origin: Neil Budworth, Director of Health, Safety and Wellbeing and Ben Bugby
Health and Safety Services Administrator

Executive Summary

Summary of activity for noting

Other Committees Consulted

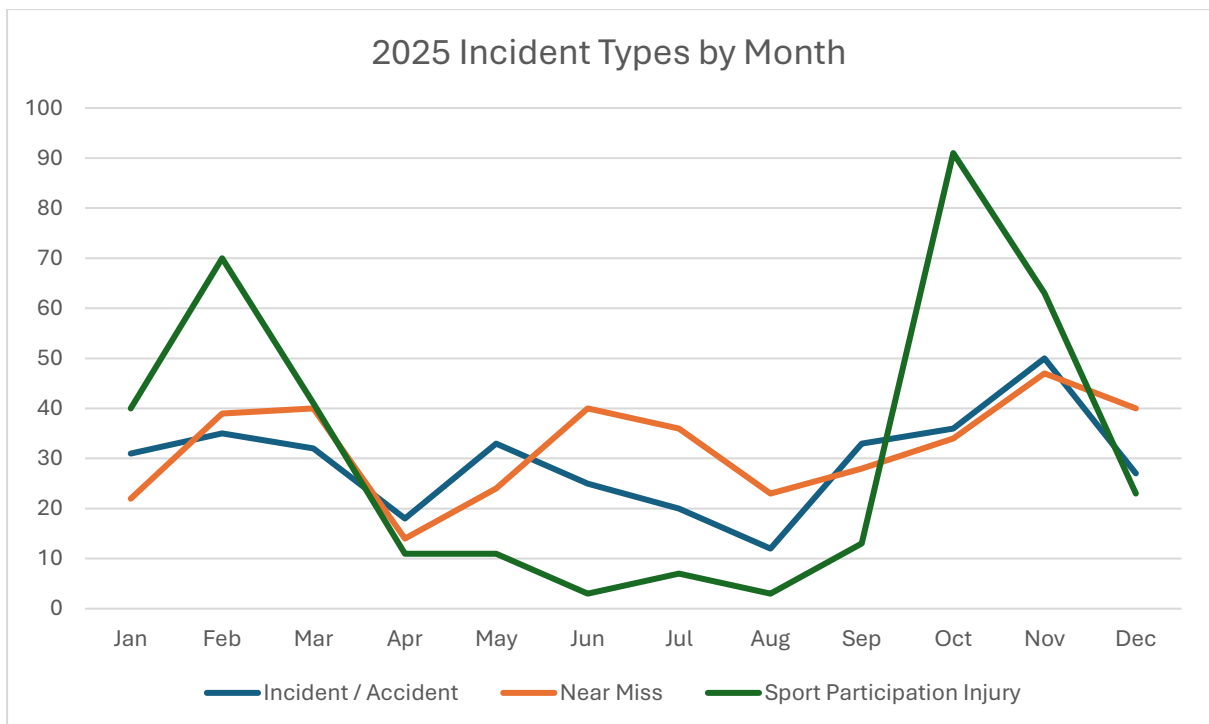
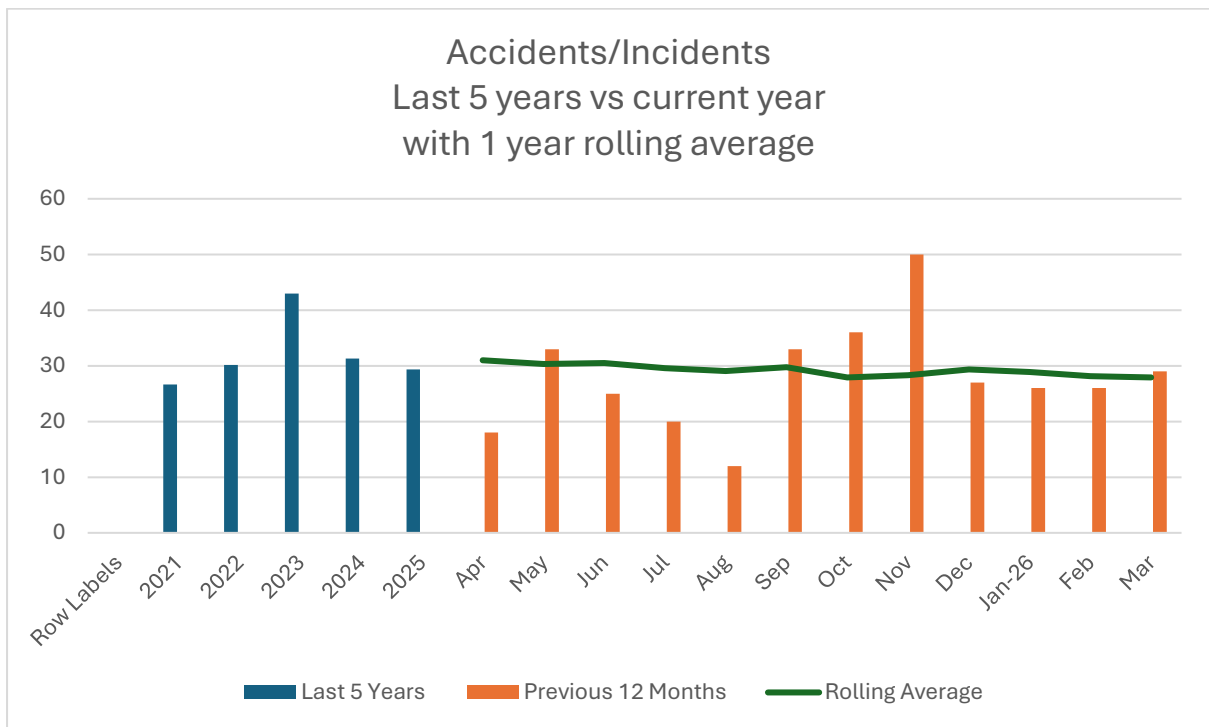
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Action Required:

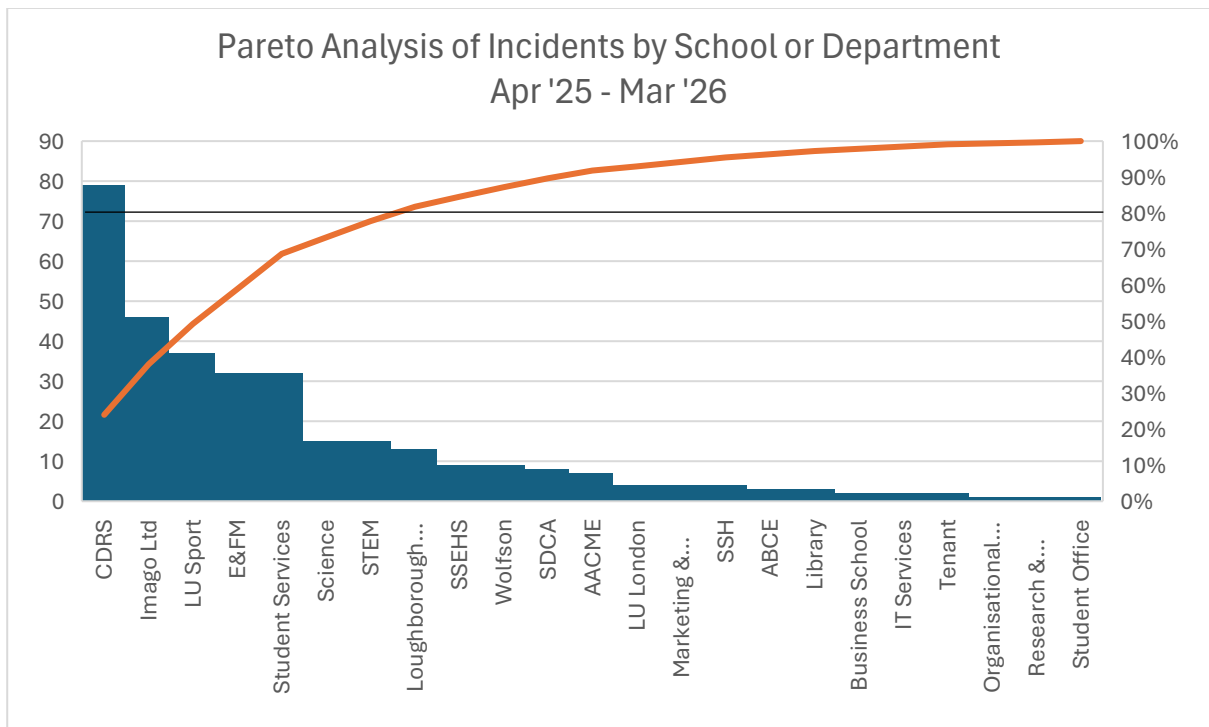
None – For information / Assurance purposes

The following data replaces the previous Incident, Near Miss and Fire Data report, and is split into three sections. The combined University data, the higher risk Professional Services areas and then the Individual schools with referral data from Occupational Health.

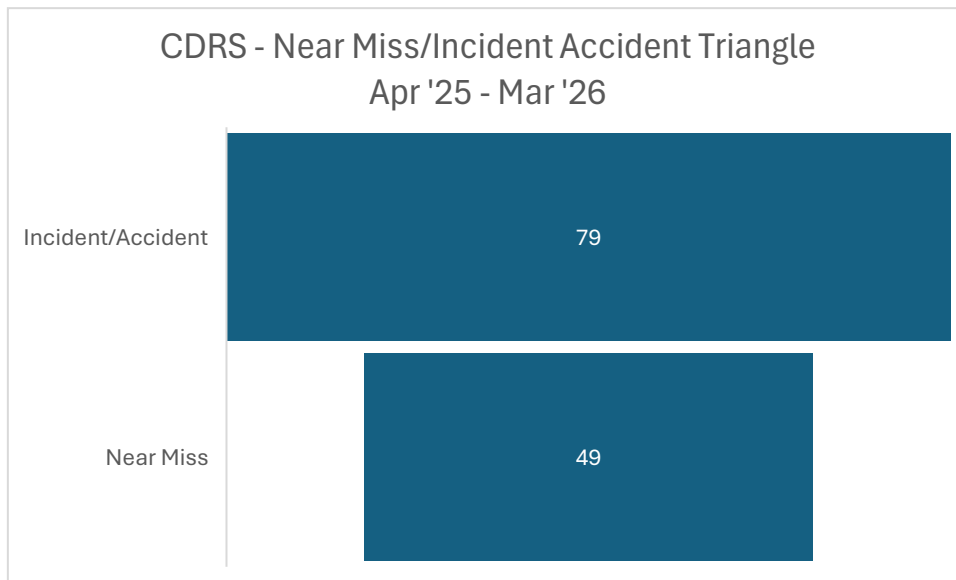
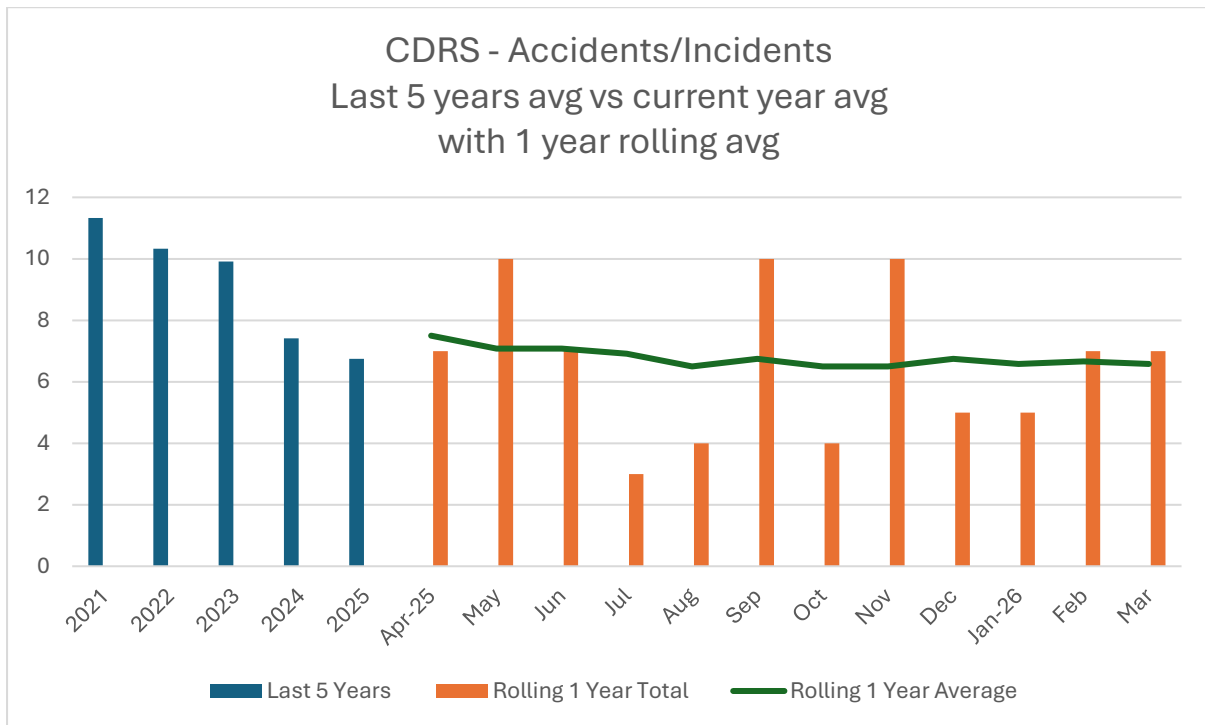
Full University data



School / service comparator data



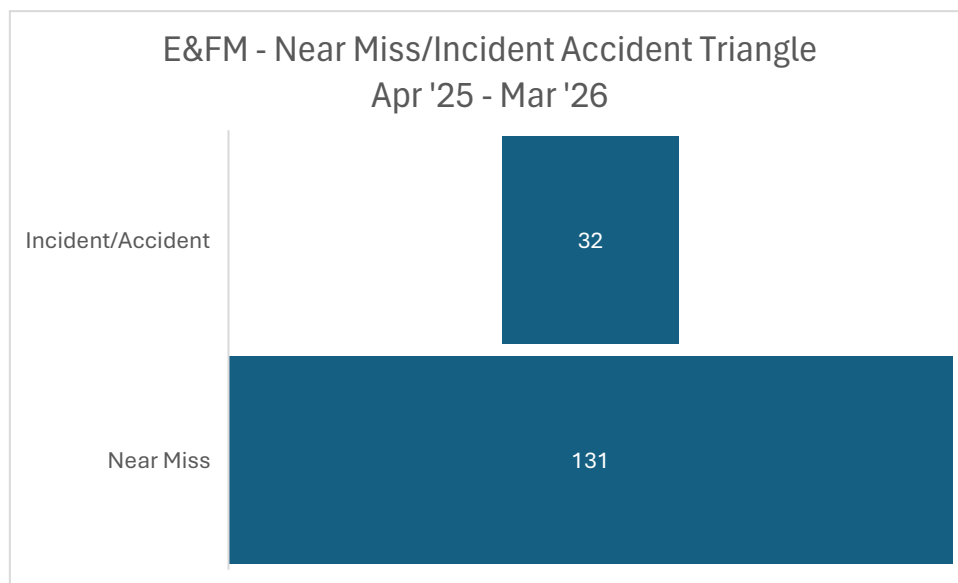
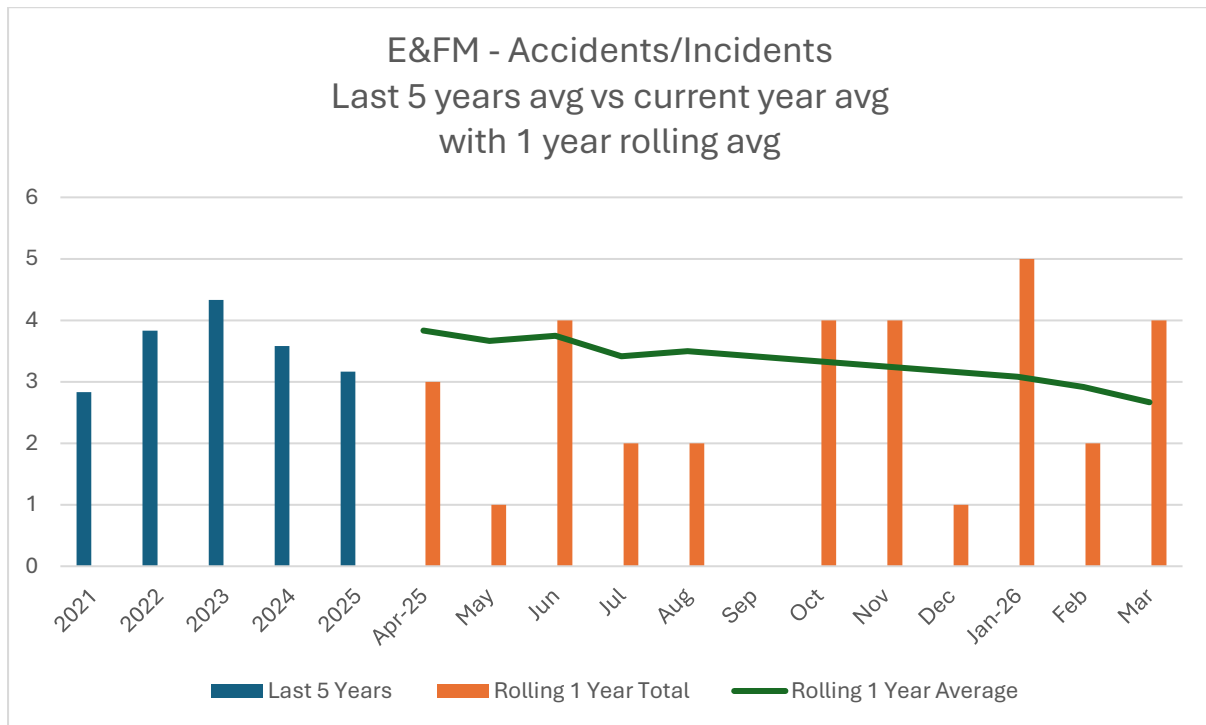
CDRS



Total Incident to Near Miss Ratio: 79:49

	Total	Total per 1,000 employees
Incident/Accident	79	257.8
Near Misses	49	159.9

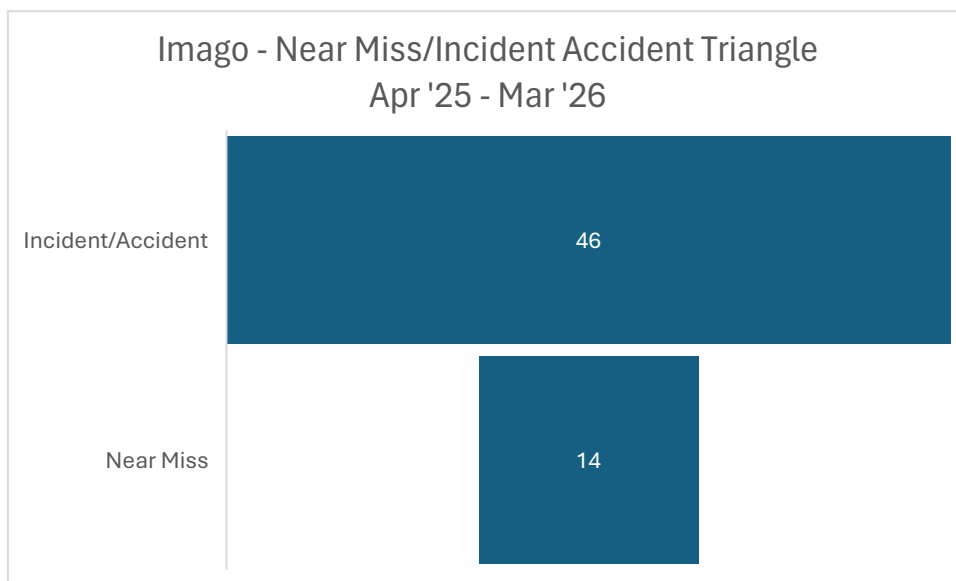
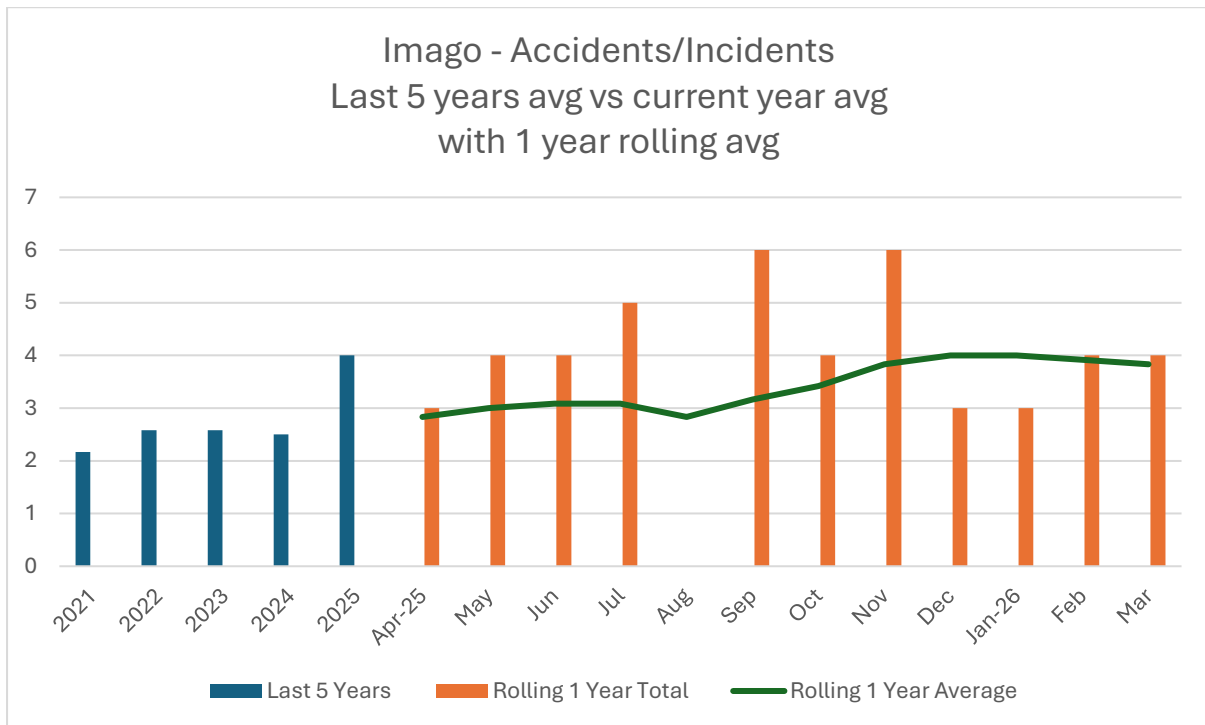
E&FM



Total Incident to Near Miss Ratio: 32:131

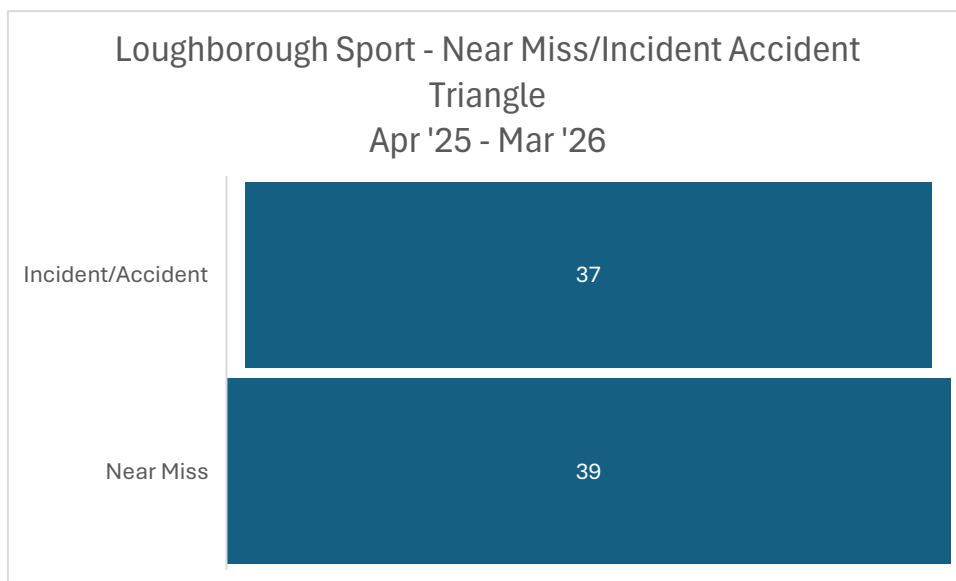
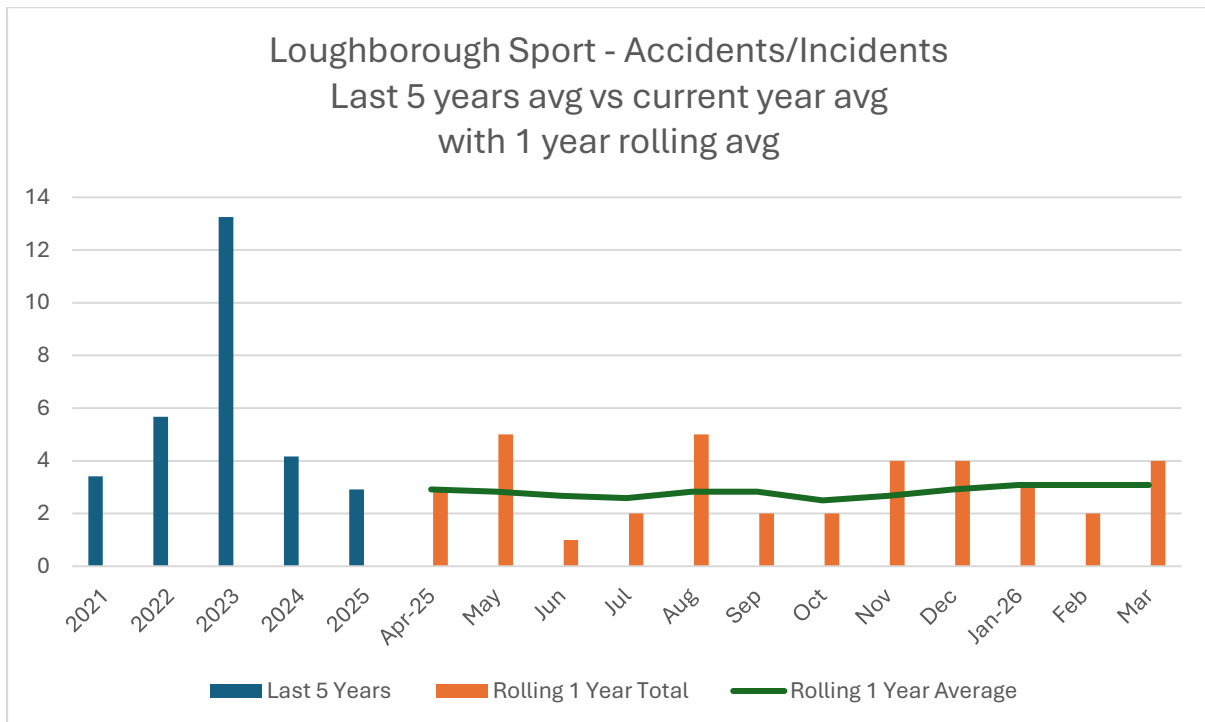
	Total	Total per 1,000 employees
Incident/Accident	32	68.8
Near Misses	131	281.8

Imago



Total Incident to Near Miss Ratio: **23:7**

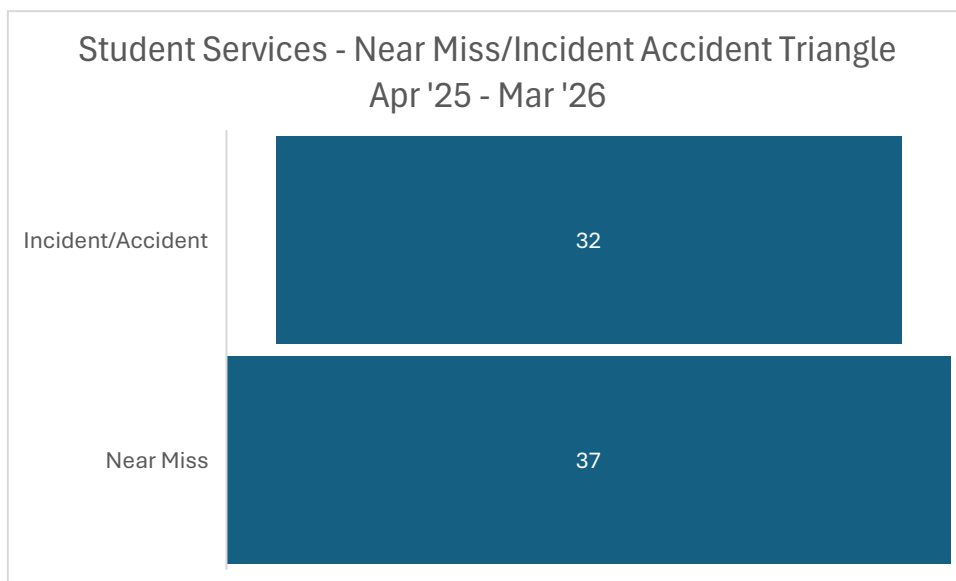
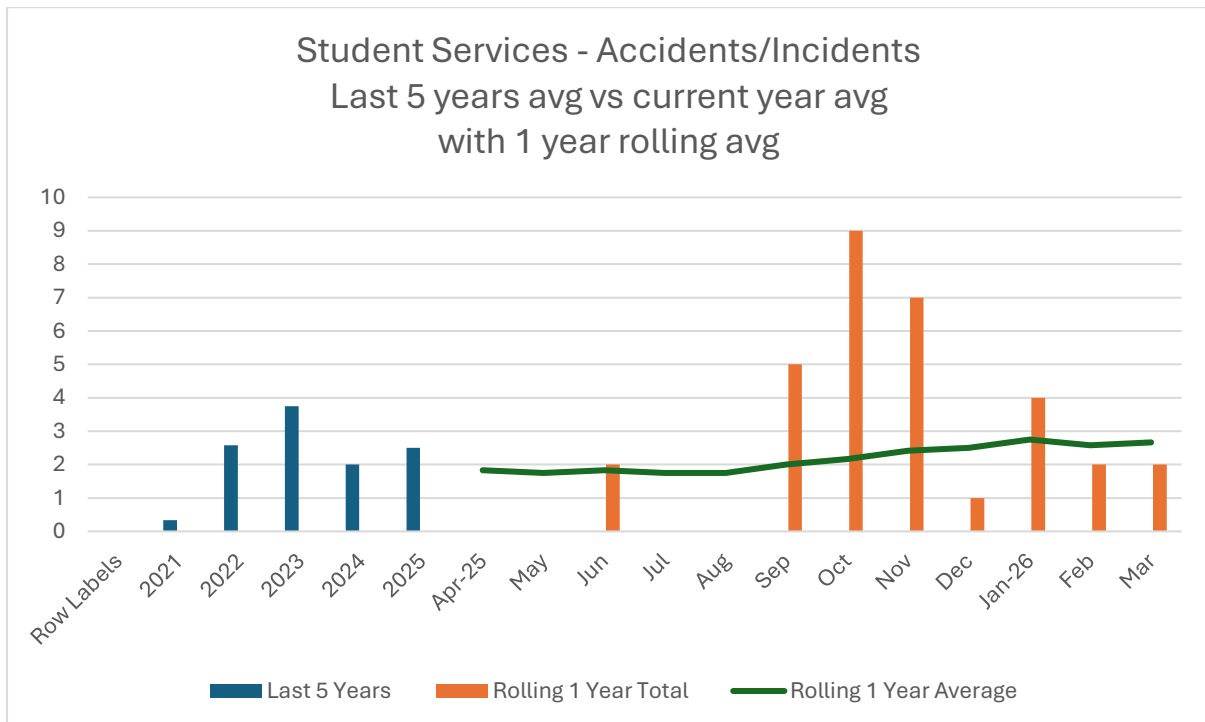
Loughborough Sport



Total Incident to Near Miss Ratio: **37:39**

	Total	Total per 1,000 employees
Incident/Accident	37	143.4
Near Misses	39	151.2

Student Services

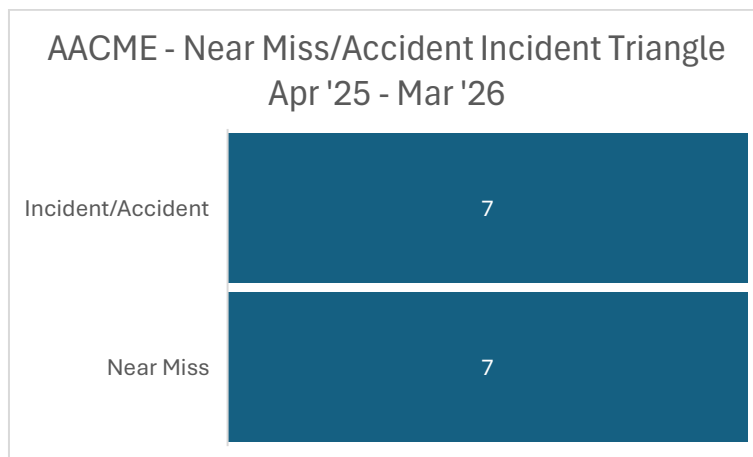
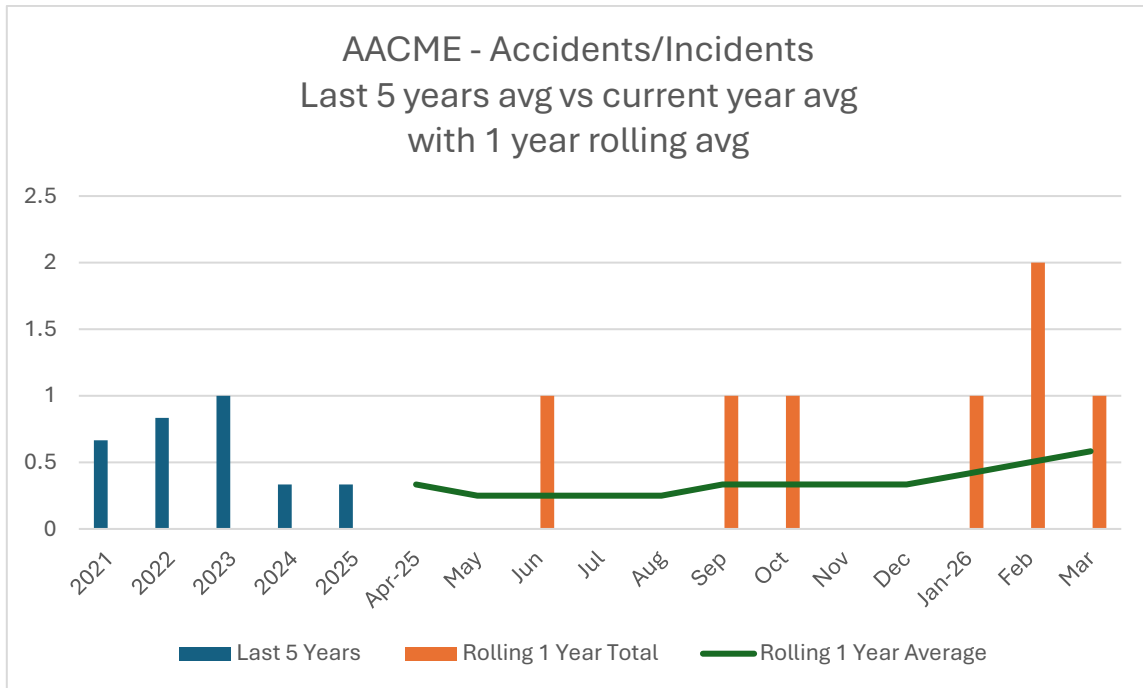


Total Incident to Near Miss Ratio: **32:37**

	Total	Total per 1,000 employees
Incident/Accident	32	204.9
Near Misses	37	143.4

Schools Data

AACME



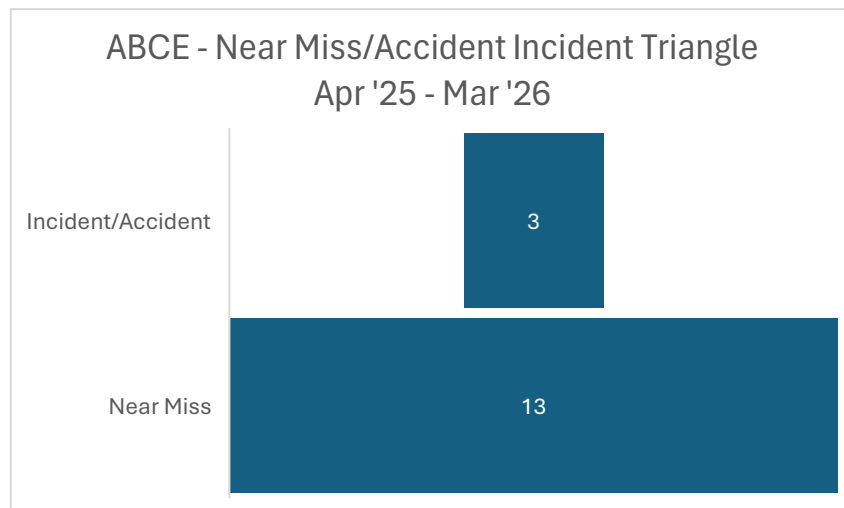
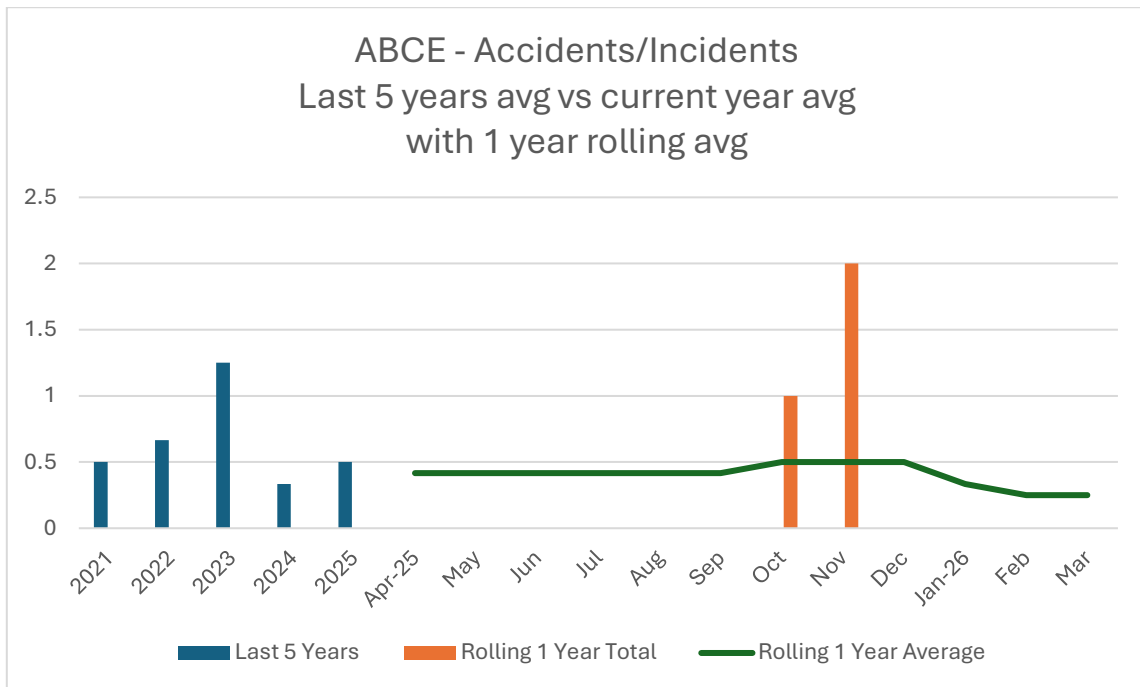
Total Incident to Near Miss Ratio: 1:1

	Total	Total per 1,000 employees
Incident/Accident	7	33.3
Near Misses	7	33.3

OH Referrals – 27, OH Referrals (per 1,000 employees) – 128.45

Referral type	Total
Mental Health	6
Musculoskeletal	2
Other	11
Self Referrals	8

ABCE



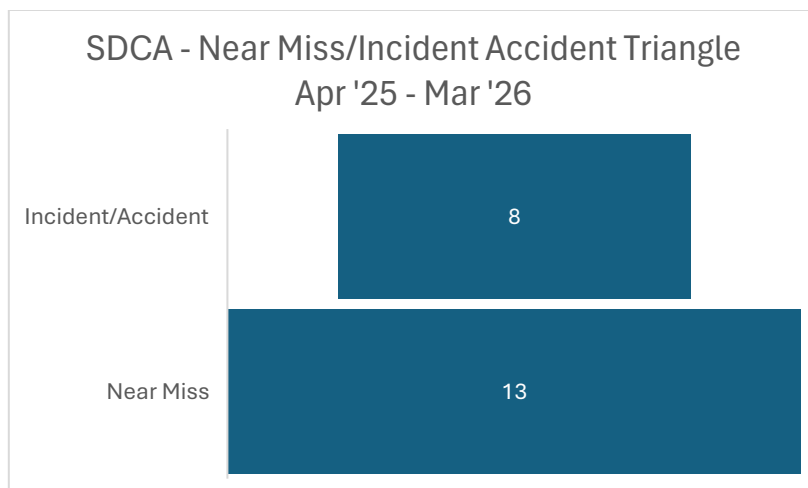
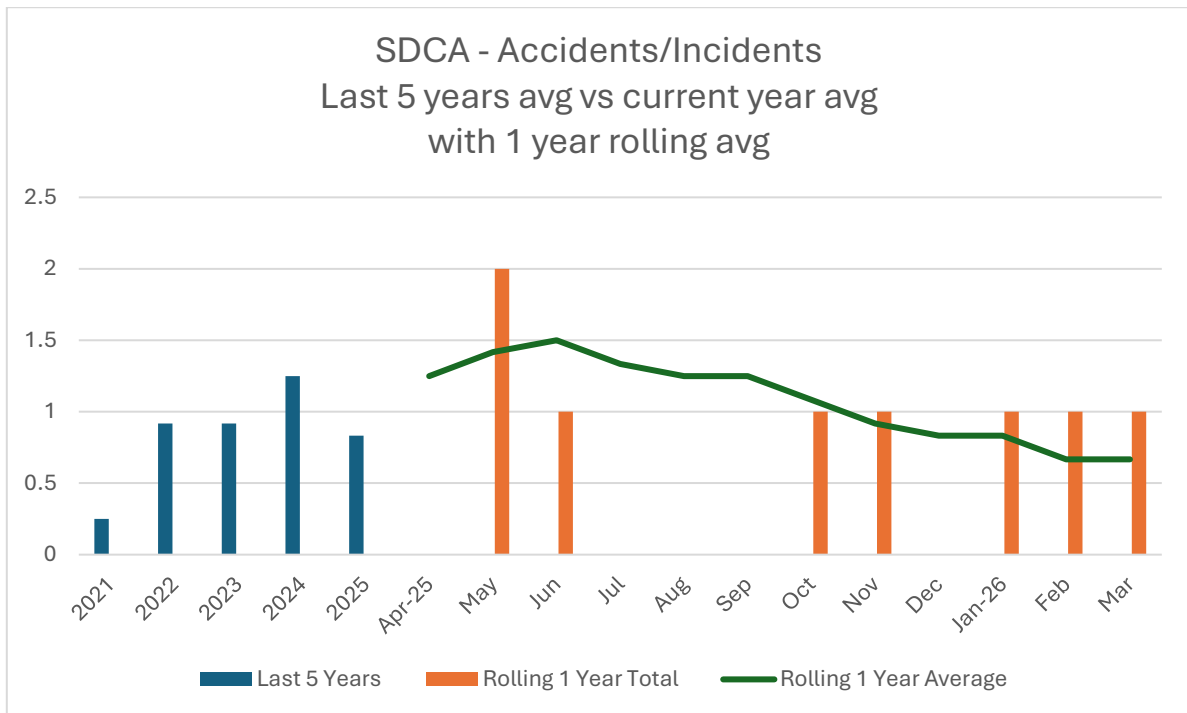
Total Incident to Near Miss Ratio: **3:13**

	Total	Total per 1,000 employees
Incident/Accident	3	22.7
Near Misses	13	98.5

OH Referrals – 19, OH Referrals (per 1,000 employees) – 143.94

Referral type	Total
Mental Health	6
Musculoskeletal	2
Other	6
Self Referrals	5

SDCA



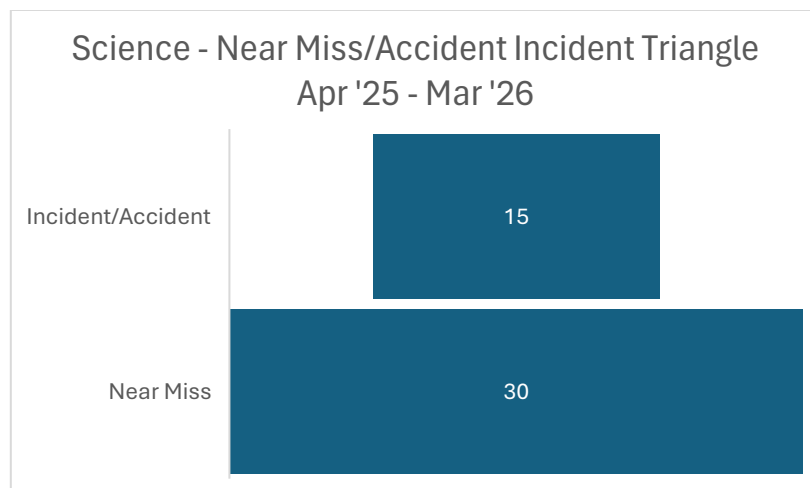
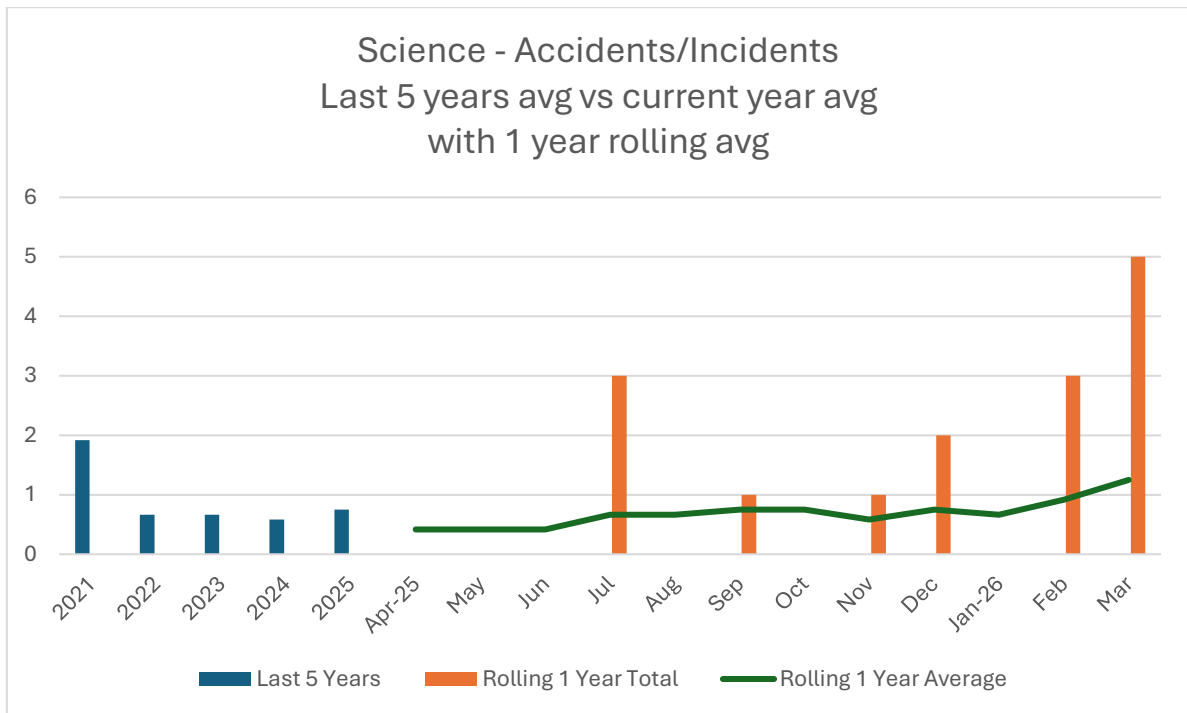
Total Incident to Near Miss Ratio: **8:13**

	Total	Total per 1,000 employees
Incident/Accident	8	44.8
Near Misses	13	72.8

OH Referrals – 73, OH Referrals (per 1,000 employees) – 408.9

Referral type	Total
Mental Health	33
Musculoskeletal	13
Other	14
Self Referrals	13

Science



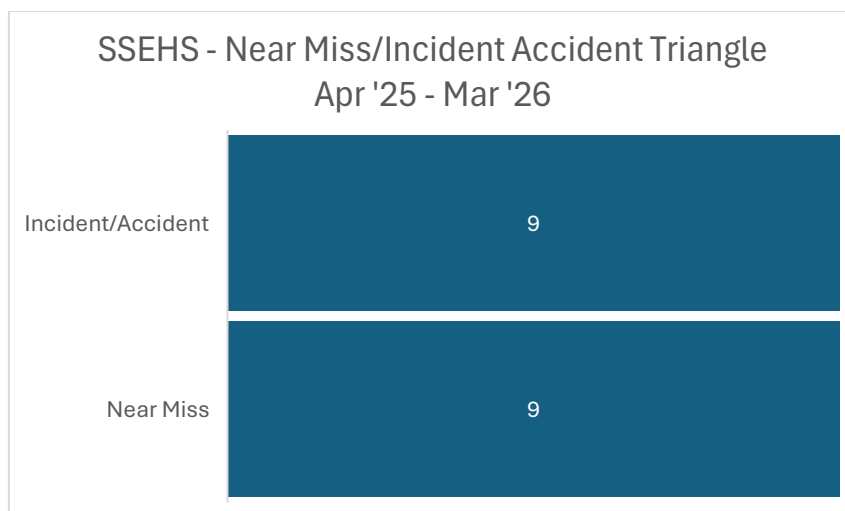
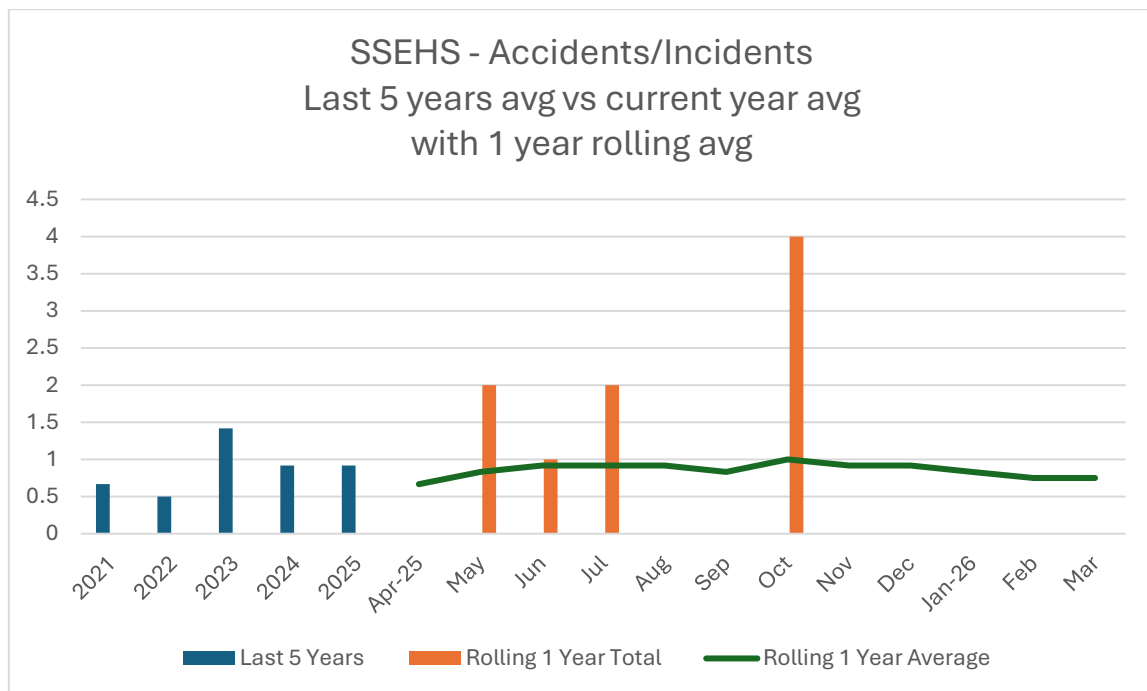
Total Incident to Near Miss Ratio: **1:2**

	Total	Total per 1,000 employees
Incident/Accident	15	60.8
Near Misses	30	121.6

OH Referrals – 30, OH Referrals (per 1,000 employees) – 121.7

Referral type	Total
Mental Health	7
Musculoskeletal	5
Other	6
Self Referrals	12

SSEHS



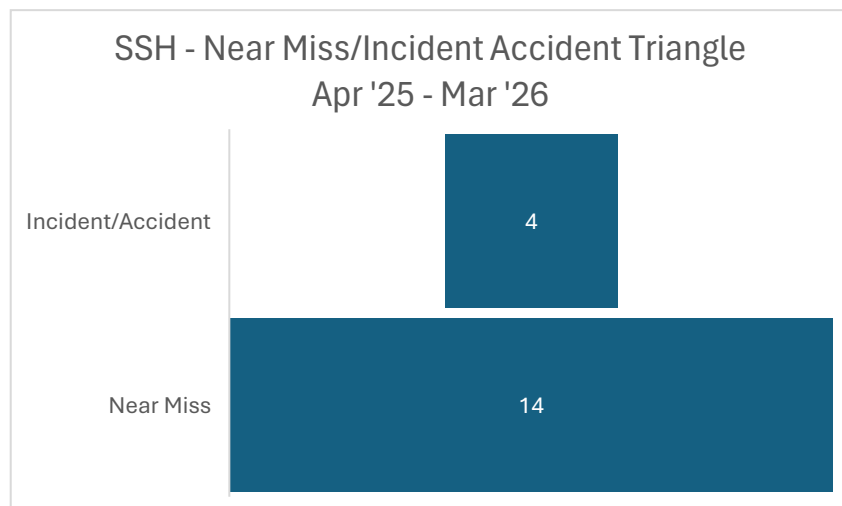
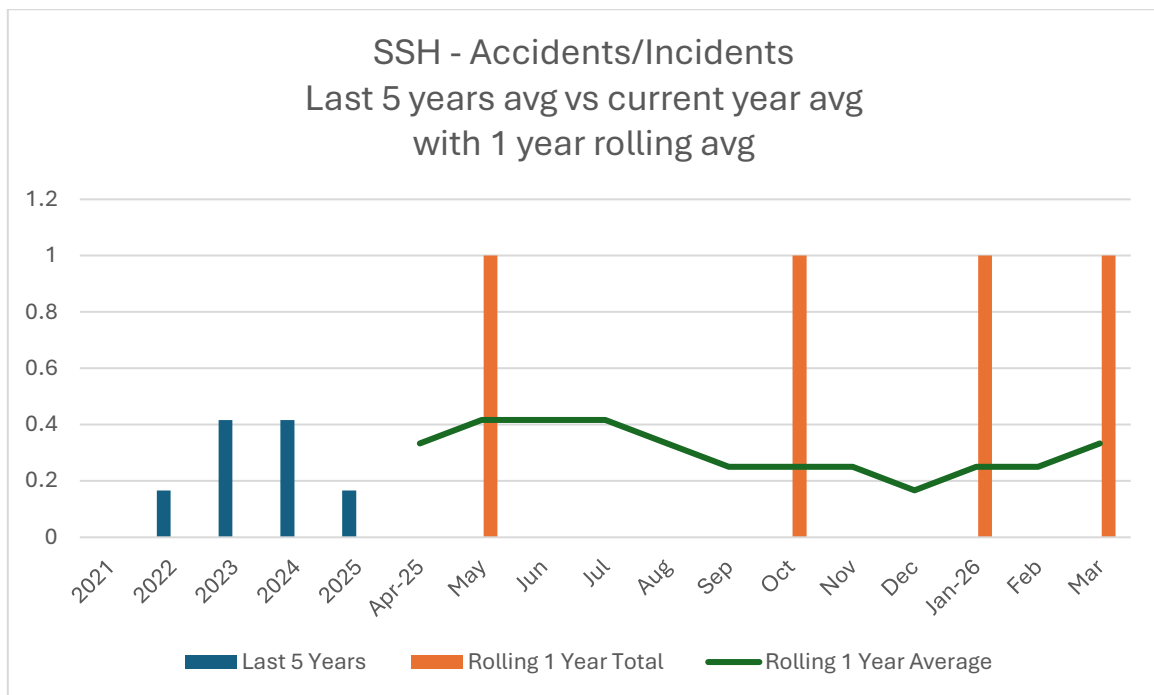
Total Incident to Near Miss Ratio: 1:1

	Total	Total per 1,000 employees
Incident/Accident	9	33.7
Near Misses	9	33.7

OH Referrals – 50, OH Referrals (per 1,000 employees) – 186.9

Referral type	Total
Mental Health	8
Musculoskeletal	8
Other	19
Self Referrals	15

SSH



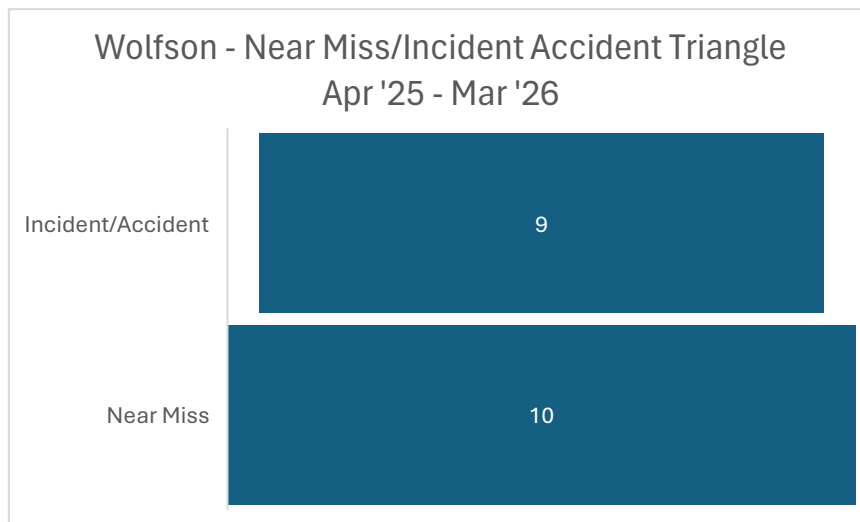
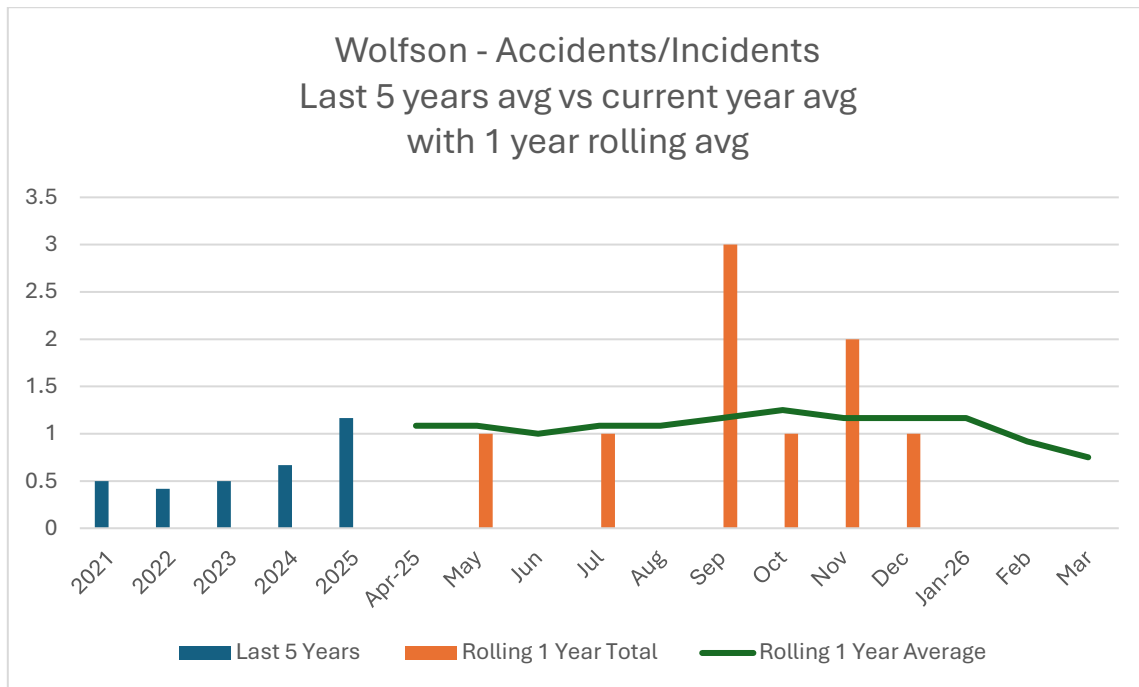
Total Incident to Near Miss Ratio: **2:7**

	Total	Total per 1,000 employees
Incident/Accident	4	16.3
Near Misses	14	57.1

OH Referrals – 44, OH Referrals (per 1,000 employees) – 179.4

Referral type	Total
Mental Health	3
Musculoskeletal	8
Other	18
Self Referrals	15

Wolfson



Total Incident to Near Miss Ratio: **9:10**

	Total	Total per 1,000 employees
Incident/Accident	9	40.4
Near Misses	10	44.9

OH Referrals – 39, OH Referrals (per 1,000 employees) – 175

Referral type	Total
Mental Health	11
Musculoskeletal	5
Other	8
Self Referrals	15

Health, Safety and Environment Committee



Loughborough
University

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 May 2026 to May 2027.

Proposal for Future Business

May 2026 Meeting

Review of HSE plans, discussion of comments made by review groups

Review of planning and review process so far

Review of first data set related to School and Service plans

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

Critical risk presentation suicide prevention strategy

October 2026 Meeting

Review of plan safety plan progress and dashboards

Detailed review of particular plan (if desired)

Discussion critical elements to be included in 2027 safety plans

Consideration of structure and operation of the HSE committee in light of change of approach

Critical risk presentation review of spectator safety planning

Critical risk presentation travel safety

January 2027 Meeting

Review of planning and dashboard approach

Critical risk presentation TBC

Occupational Health and Wellbeing Annual Report

Radiation Protection Annual Report

Critical risk presentation review of student accommodation construction

Critical risk presentation Laser Safety

Agree H&S RAG Rating

May 2026 Meeting

Review of HSE plans, discussion of comments made by review groups

Review of planning and review process so far

Review of data set related to School and Service plans

Critical risk presentation TBC

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 & FM
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

January 2026 Meeting

HSE Update from the School Design and Creative Arts
HSE Update from School of Aeronautical, Automotive, Chemical and Materials
Engineering
Review of Health and Safety Planning pilot
Occupational Health and Wellbeing Annual Report
Radiation Protection Annual Report
Agree H&S RAG Rating

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
<p>General Update</p>		
<p><u>Significant Incidents</u></p> <p>Cricket Pitch Cover On the evening of before the Big BUCS Wednesday, wind caught the cricket wicket cover on the Brockington cricket ground and lifted it over the hedge onto the East link road, demolishing a street light. The incident is considered a high potential near miss and will be the subject of an Incident Review Panel. Reminders have been issued to ask colleagues to consider equipment vulnerable to high winds and take suitable precautions</p>  <p>Crowd Collapse Football Stadium During the Big BUCS football final, a portion of the crowd surged in response to the winning team's celebration and a portion of the pitch perimeter barrier collapsed. The incident is considered a high potential near miss and will be the subject of an Incident Review Panel. The incident is considered a high potential near miss and will be the subject of an Incident Review Panel. Discussions are being held with the FA regarding best practice.</p> 	<p>To recognise the importance of risk assessment</p> <p>To note change in crowd behaviour and need to manage crowd growth</p>	<p>None</p> <p>To note risk and corrective actions</p>

<p>Relevant UK Case UK Athletics have pleaded guilty to Corporate Manslaughter following the death of a para athlete when a throw cage collapsed in 2017. The case was brought as there was a risk of which the senior manager was, or should have been aware, which was allowed to persist over an extended period of time and the risk of death was obvious, serious and longstanding. The risk in this case was the instability of the cage due to the absence of key structural supports. Sentencing will take place later in 2026.</p> <p>Health and Safety Planning Process Higher risks Schools and Professional Services have now developed Health and Safety plans and these have been reviewed by peer review groups – a separate report will be provided on this process.</p>	<p>To note case which is relevant to our activity</p>	
<p>Business Continuity and Crisis Response</p>		
<p>The University Silver response group has been trained by external specialists in crisis response. In addition, Heads of Operations have received Business Continuity training.</p>		
<p>Policy & Procedure</p>		
<p><u>Mass Notification and Lone Worker Management</u></p> <p>The procurement and use of the Safezone system has been approved and initial discussions have been held regarding deployment.</p> <p>It is likely that the software will be introduced in a phased manner with full implementation in of all elements in September 2027.</p> <p>This software is being investigated as part of a response to the introduction of the so called 'Martyn's Law'.</p>		

Occupational Health and Wellbeing		
Occupational Health A thorough procurement exercise has led to the contract with Health Assured as our employee assistance programme, being awarded. We have a 16% utilisation rate for the service, average utilisation is between 6-8% for businesses. This shows the employees at the University are aware of the service and use it effectively- there is also an excellent use by all age demographics at the University – of the wisdom app. Since the implementation of the GLOW framework, there has also been an increase in usage of the wellbeing packages on the wisdom app.		

Biological		
<p>The new versions of the biological risk assessment template and genetic modification risk assessment template have been approved by the GM/Biosafety committee. The new templates will be added to the Health and Safety website along with a new guidance document on completing biological risk assessments.</p> <p>A new biological risk assessors' course was trialled on 29th April. Members of the Health and Safety Service are reviewing course feedback from attendees to identify the next steps.</p> <p>Following the genetic modification classification training last year, the University's external advisor shadowed April's GM/Biosafety committee meeting to determine the effectiveness of the training.</p>		
Chemical		
<p>The Chemical Safety Policy has been updated following feedback from the Chemical safety committee. The amended policy will be submitted for approval from the central HSE committee in October.</p> <p>A high-level briefing for Deans on the management of the risks of hydrogen has been developed to support the increasing work with hydrogen across the Schools.</p>	To note	None.

Radiological Safety		
<p>Orbital Radiological Protection Advisor (RPA) has been appointed as the new provider for the University's RPA and RWA (Radiological Waste Adviser) services. This ensures that the University remains compliant with the Ionising Radiation Regulations 2017 and the Environmental Permitting Regulations 2016.</p> <p>Orbital have conducted an audit of our radiological processes. This occurred on 14th April. The new RPA will be conducting audits of all areas using ionising radiation over the course of the year.</p> <p>The University was inspected by the Environment Agency (EA) on 3rd March on the sealed and unsealed source permits. The inspection was successful, with positive comments received on the management documentation, records and systems in place. Colleagues in the Health and Safety Service are working to complete the recommendations suggested by the inspector as part of continuous improvement. An application has been submitted to vary the University's unsealed source permit to better reflect research activity at Loughborough. This approach was supported by the EA inspector during their visit in March.</p> <p>The Non-Ionising Radiation policy is out for consultation with the Non-Ionising Radiation Committee. The deadline for feedback is the 6th April. The Ionising Radiation policy is currently under internal review. Once the policy has been updated, it will be circulated to the Radiation Protection Sub-Committee for feedback.</p>	To note	
Fire		
<p>Discussions have been held with the Building Safety Regulator regarding the application of the Building Safety Act to Towers.</p> <p>Following an initial submission to the building safety regulator a structural survey of Towers has been commissioned and undertaken and the resident engagement strategy has been revised. The survey and revised resident engagement strategy have been now been resubmitted to the regulator.</p>	To note	

Annual Assurance Statement

Origin: Neil Budworth Director of Health, Safety and Wellbeing

Action Required:

HSE Committee is asked to APPROVE its 2025/26 Annual Assurance Statement.

Executive Summary

HSE Committee is required to give a statement on the level of assurance it can give in relation to the issues within the Committee's remit. The paper defines the mechanisms used to give assurance, and HSE Committee is asked to approve the level of assurance suggested, which is high assurance.

Other Committees Consulted

Relevant HSE committee sub-committees have been consulted via routine reporting

Equality Diversity and Inclusion Considerations

No relevant issues

Statement relating to the Annual Compliance Statement

HSE Committee monitor compliance via a number of mechanisms. A series of subject matter experts are charged with monitoring and maintaining compliance and they report via committee structure. KPI data and narrative is presented at each HSE meeting.

In addition audits are completed and for significant risk areas the subject matter experts are on a periodic basis asked to present to the HSE committee on a key risk topic.

These presentations consider the risk and how it manifests, the controls in place and how those controls are monitored. This presentation also allows the subject matter expert to say if they have any concerns and to state their view on the level of compliance.

In addition, each School is now being asked to provide an assurance statement on an annual basis and compliance and monitoring is built into their plans, which are cross checked.

On this basis HSE Committee are happy to give the assurance below.

Annual Compliance Assurance: Committee Statement HSE Committee (2025/26)

Committee	High Assurance Area	Chairs Assurance Statement
Health, Safety and Environment Committee	Asbestos Management Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.
	Biological Safety Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.
	Chemical Safety Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.
	DSEAR Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.
	Electricity at Work Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.
	Fire Safety Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.
	Gas Installation Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.
	Ionising Radiation Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.

	Laser Safety Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.
	Local Exhaust Ventilation (LEV) Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.
	LOLER Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.
	Pressure Systems Safety Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.
	Water Management Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.
	Safeguarding Policy	The HSE Committee has mechanisms in place to monitor compliance with this policy via the Safeguarding and Prevent Sub-Committee, supported by Safeguarding and Prevent Working Groups, and receives reports on compliance levels at each meeting with a narrative. The committee is satisfied obligations are being met. No issues reported. Assurance is high.

In the opinion of the Health, Safety and Environment Committee this statement represents an accurate statement of the level of compliance.

R Thomson
Provost and Deputy Vice Chancellor

Health, Safety and Environment Committee



Risk Rating Definitions

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

Action Required:

To agree risk rating definitions

Executive Summary

HSE Committee requested a more bespoke interpretation to help clarify risk ratings

Other Committees Consulted

None

Equality Diversity and Inclusion Considerations

None

Suggested HSE Committee interpretation

1 – GREEN – Risks have been identified and controls are in place. Assurance processes highlight that controls are working well and there are no significant concerns

2 – green – Risks have been identified and controls are in place. Assurance processes highlight that controls are working. There are small number of risks which warrant closer attention and / or monitoring, but there are plans in place to monitor and control these risks.

3 – AMBER – Risks have been identified and controls are in place. Assurance processes highlight that controls are working. There are small number of risks where controls need improvement, but these have been identified and a plan exists to improve these controls.

4 – red – Unidentified risks exist, or there are controls which are not being effectively implemented. Or a significant risk has been identified, and a plan has not yet been developed to manage the risk. There is a risk of harm to individuals and / or property and a reputational risk, but the risks are limited and unlikely.

5 – RED – Assurance of risk identification and control cannot be given. There are risks which pose a realistic and significant risk of harm to individuals and / or property and a reputational risk and plans are not in place to tackle these in a timely manner.

Safeguarding & Prevent Sub-Committee

Terms of Reference

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

Loughborough's Safeguarding Policy, including definitions of safeguarding and prevent, can be found [here](#).

Composition

Chair: Director of Student Services (Lead Safeguarding & Prevent Officer)	Charlie Wheeldon
Deputy Chair: Head of Student Wellbeing & Inclusivity (Deputy-Lead Safeguarding Officer)	Karen Watts
Head of Security (Deputy-Lead Prevent Officer)	Ant Dales
SWAI Safeguarding Officer	Kate Wigham
Head of Student Life	Helen Rylands
Human Resources	TBC
Organisational Development and Change	Tina Byrom
Loughborough Sport	Cath Harvey
Estates and FM	Steve Warren
EDI Services	Lisa Brooks-Lewis
Loughborough London	Rachael Brivio
Loughborough Students' Union	Nicky Conway
Secretary	Carys Page