



## Minutes SAF23-M3

Minutes of the Health, Safety and Environment Committee held on Wednesday 4 October 2023

### Attendance

#### Members:

Deborah Bowen, Penny Briscoe (ab), Neil Budworth, Claudia Eberlein, Sandy Edwards (ab), Alec Edworthy, Graham Howard (ab), Chris Linton, Liz Monk, Graham Moody, Robyn Reeve (ab), David Roomes, Jagjit Samra, Alex Stacey-Midgley, Richard Taylor (Chair).

#### In attendance:

M Ashby (Secretary), Tony Edwards & Mitul Shah (for M23/39), Jan Godsell & Jane McCormack (for M23/40), Fran Bonner, Claire Fletcher, Mike Haynes-Coote & Caroline Smith (for M23/41), Mark Lewis & Ruth Casey (for M23/42) and Julie Turner (for M23/42 & M23/45).

#### Apologies:

Penny Briscoe, Sandy Edwards, Graham Howard, Robyn Reeve.

### 23/37 Minutes

#### SAF23-M2

The minutes of the meeting held on 17 May 2023 were APPROVED.

### 23/38 Matters Arising from Previous Meetings

#### SAF23-P41

- 38.1 Actions arising from previous minutes were NOTED and their current status confirmed.
- 38.2 Arising from M22/51.2, *Sustainability Annual Report*, the Committee noted that the completed Sustainability Leadership Scorecard was to be included in the Sustainability Annual Report. The Secretary would seek clarification to establish how this action was being progressed in the absence of the Sustainability Manager. **ACTION: Secretary to seek update from Director of Estates and FM**
- 38.3 Arising from M23/25.2, *HSE Update: School of Social Sciences and Humanities*, the School's Head of Operations would be asked to provide confirmation before the February meeting that the risk register review had been completed. **ACTION: Secretary to inform SSH Head of Operations**
- 38.4 Arising from M23/28.3, *Director of HSW Update*, members noted that the Dean of Loughborough Business School was not being sent sickness absence information. She would raise this matter with the School's HR Business Partner. **ACTION: LB Dean**

38.5 Arising from M23/30 *Snow and Ice Clearance Policy*, Estates and FM were asked to finalise the guidance document in the absence of the Sustainability Manager. **ACTION: Secretary to inform Director of Estates and FM**

## 23/39 Health, Safety and Environment Update: Loughborough University London

### SAF23-P42

- 39.1 The Committee RECEIVED an update from the Operations Director on health, safety and environmental arrangements at LU London.
- 39.2 Culture had been identified in the LU London Risk Register as being one of the main risks that it faced. Specifically, there were challenges arising from the differing cultural norms that existed within the international student body.
- 39.3 Members noted that the Health and Safety Service consulted the LU London Facilities Manager prior to the promulgation of new University health and safety policies and processes, to ensure that they were also applicable to the London campus.
- 39.4 The building occupied by LU London was open 24 hours a day. This meant that there was limited security coverage outside office hours. This posed a potential risk to occupants and should be acknowledged in the LU London Risk Register. **ACTION: LU London Operations Director**
- 39.5 Systems were in place to ensure that out-of-hours users were logged, and no visitors were permitted in the building outside office hours. The building was patrolled by a single member of security staff during the night. This potentially posed a risk to safety should an incident occur. LU London Senior Management Team had restricted access to certain areas of the building out of office hours to reduce the number of areas that needed to be patrolled. The Team was exploring the possibility of increasing the number of security staff on duty in the building outside office hours and should inform HSE Committee if any changes were made. **ACTION: LU London Senior Management Team**

## 23/40 Health, Safety and Environment Update: Loughborough Business School

### SAF23-P43

- 40.1 The Committee RECEIVED an update from the Dean on health, safety and environmental arrangements in Loughborough Business School.
- 40.2 The School was thanked for piloting the Occupational Health and Wellbeing Service's Wellbeing Survey. After the survey had been completed, a committee had been formed to work on the findings of the report. The Occupational Health Team had 1:1 health MOTs available to run when the School was ready to take advantage of them.
- 40.3 The following points were noted in particular:
- (i) The School's links with the Sustainability Team had strengthened and were considered to be more effective. The School intended to invite a member of the team to School sustainability meetings in the future.
  - (ii) The School's Senior Management were confident about levels of staff awareness of health and safety matters due to regular interactions with staff about health and safety issues.
  - (iii) An incident involving a cricket ball hitting a window in the Sir Richard Morris Building had been referred to SDC to determine if incidents of this kind could be avoided in the future. **ACTION: Director of HSW to follow up with SDC**

- 40.4 The Committee was informed of a situation at another university where a member of staff had brought a civil claim against a senior manager as well as the university itself. The university had not contributed to the individual's legal costs. Members noted that where analogous situations had occurred at Loughborough University in the past, the staff member's legal costs had been met by the University. It was noted, however, that staff needed to have complied with relevant University policies to ensure that the University could provide financial support in such occurrences. The Director of Finance was asked to clarify the current position. **ACTION: Secretary to inform Director of Finance**

## 23/41 Health, Safety and Environment Update: University Event Safety

### SAF23-P44

- 41.1 The Committee RECEIVED an update on University event safety from members of the University's Events Team and SDC.
- 41.2 Members noted that external bodies who use the campus for events over an extended period of time needed to be reminded periodically about safety requirements and also made aware of new requirements. This was a challenge for the Events Team and for SDC but was achieved via renewal of contracts with the external bodies and also via regular communication with their staff on the ground.
- 41.3 Members were made aware of a recent incident where a member of the public had fallen from a gantry next to the water-based hockey pitch. The response to the incident had been coordinated by the Director of HSW. He was asked to ensure that the findings from the incident had been followed up. **ACTION: Director of HSW**
- 41.4 Alcohol was known to be a common risk factor at events held on campus. The Events Team was seeking ways to ensure that appropriate individuals took ownership of risk assessments and protocols for hall events. The LSU Review Group would be asked to define the roles of the University and LSU in relation to hall activities. The Group would also be asked to include health and safety within its terms of reference. **ACTION: COO**
- 41.5 The Security Team was commended for its response to incidents at events and also at ad hoc events, which were often not considered to be events by their organisers.
- 41.6 The Team was asked about the coordination of LSU events that were held on the University campus and whether responsibility for aspects of the events was clear to the LSU and University staff who were coordinating them. There was said to be increasing levels of collaboration between LSU and University contacts over events and greater appreciation of the benefits of collaboration to both parties.

## 23/42 Human Tissue Act Update

### SAF23-P45

- 42.1 Members RECEIVED an update from the Dean and Head of Operations for the School of Sport, Exercise and Health Sciences on the School's progress in ensuring compliance with HTA requirements. They noted that the School had prepared a pathway to ensure near compliance for all projects by the end of October.
- 42.2 The Committee noted the action that had been taken by the School and the significant progress made since the last meeting in order to comply with requirements. It was anticipated that the workload to remain compliant should reduce in the future. This was due to a change in the School's approach to recording and storing samples that would mean that staff would differentiate between reportable and non-reportable samples at an early stage.
- 42.3 The Strategic Scientific Technical Lead was thanked for her advice and for Chairing the HTA Working Group.
- 42.4 The School was asked to provide an update for the February meeting to provide the Committee with assurance of its compliance. **ACTION: SSEHS Dean & Head of Operations**

## 23/43 Constitution, Terms of Reference and Membership for 2023/24

### SAF23-P46

- 43.1 HSE Committee RECEIVED its Committee's constitution, terms and reference and membership for the 2023/24 academic year and noted that Penny Briscoe intended to stand down as a lay member of the Committee.
- 43.2 Members noted the Governance and Nominations Committee requirement that key University committees should achieve a diverse membership which included a minimum of 40 per cent female members and 15 per cent BAME members. HSE Committee membership complied with the minimum level for female members but not the level set for BAME members. The Chair and Director of HSW would identify a potential new lay member and reflect upon ways to improve BAME membership of the Committee. **ACTION: Chair, Director of HSW**
- 43.3 Members APPROVED proposed action in response to EDI-related matters that had been identified in the survey of the Committee's effectiveness and subsequently by the PVC(EDI).

## 23/44 Director of Health, Safety & Wellbeing Update

### SAF23-P47

- 44.1 Members RECEIVED a summary report by the Director of Health, Safety and Wellbeing on issues and actions relating to health, safety and wellbeing.
- 44.2 The following were noted in particular:
- (i) Work had taken place over the summer to try to mitigate any risk from Legionella in the water system in Towers Hall. An independent audit report had endorsed the University's approach to the risk and found that it had gone above and beyond the action expected to protect staff and students.
  - (ii) The Staff Inclusivity Group had raised concerns over the withdrawal of face-to-face counselling that had previously been provided by Student Services. The decision to withdraw the service had been taken following a clinical assessment. The Employee Assistance Programme (EAP) would continue to provide support to staff via a number of different routes without a waiting list. The EAP facilitated anonymous feedback from staff who have received counselling support by forwarding a survey link to them.
  - (iii) Estates and FM had been surveying the campus for some months to identify buildings that were made of reinforced autoclaved aerated concrete (RAAC). To date, no evidence of RAAC had been found in any of the buildings.
- 44.3 Members APPROVED the final signoff of the decommissioning of the Graham Oldham Building, which could now be demolished.

## 23/45 Statutory Compliance Key Performance Indicators

### SAF23-P48 SAF23-P49

- 45.1 The Committee RECEIVED updates on statutory compliance key performance indicators. It NOTED progress for key areas of statutory compliance and actions relating to areas of concern.
- 45.2 Members noted that an external company, SMS Environment Hydrop, had been employed to audit the University's management of water systems. SMS also reviewed the advice and software monitoring provided by Hydrop. The audit confirmed that the University's approach was in line with, and in some cases above, that required and noted that the binary nature of some of the thresholds set for action risked significant concerns being masked by large volumes of relatively minor issues. Work was under way to determine what actions could be taken to better prioritise alerts.

- 45.3 Members were informed that the designated flushing group for the School of Aeronautical, Automotive, Chemical and Materials Engineering needed to be updated. The matter would be raised with the University Compliance Officer. **ACTION: Graham Moody**
- 45.4 Members noted that the HTA compliance sub-category of 'Inventory/traceability' remained at red but needed to be seen in the context of the developments detailed in the latest update from the School of Sport, Exercise and Health Sciences (see M42 above).

## 23/46 HSE Risk Rating

### SAF23-P50

- 46.1 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 be 'Green'.
- 46.2 Areas which remained a concern and which had the potential to influence the rating were issues arising from the Covid 19 pandemic, Legionella, fire and reinforced autoclaved aerated concrete. Mitigations were either planned or in place for these areas, and this had allowed the Director of Health, Safety and Wellbeing to recommend a 'Green' rating.
- 46.3 The Committee AGREED to recommend the 'Green' risk rating to Senate and Council.  
**ACTION: Secretary.**

## 23/47 Management of Electronic Transport Devices on Campus

### SAF23-P51

- 47.1 The Committee considered proposed action in relation to the management of electronic transport devices on campus. It noted that the use of e-scooters, e-skateboards and hoverboards was not permitted on campus. Use of these devices was against the law, and users were unlikely to be insured in the event of an accident.
- 47.2 The Committee considered its position on their use. It agreed that it was appropriate for the University to continue to ban them and APPROVED the proposal of a campaign to increase awareness of this position. The campaign should make clear the consequences of using them on campus. The University's tenants would be made aware of the University's position.  
**ACTION: Health & Safety Service and Campus Security**
- 47.3 Members noted that the use of e-bikes was promoted by the Sustainability Team as an alternative to car use. However, modified e-bikes which were not at the manufacturer's specification, or which used an inappropriate charger, presented a significant fire risk. The situation was exacerbated when owners stored the bikes in offices or halls of residence due to a lack of secure storage facilities.
- 47.4 The Committee acknowledged the long-term need for suitable storage incorporating charging points for e-bikes as they grew in popularity. It APPROVED the removal of non-compliant e-bikes from University buildings due to the fire hazard that they presented. It also APPROVED a proposal to monitor uptake and to incorporate secure storage and charging points into capital plans by developing cycling hubs across campus. **ACTION: Health & Safety Team to communicate risks**

## 23/48 Environmental Sustainability Policy

### SAF23-P52

The Committee APPROVED a minor change to the Environmental Sustainability Policy on the recommendation of the Chair of Sustainability Sub-Committee.

## 23/49 Proposed Future Business

### SAF23-P53

- 49.1 The Committee considered a plan of proposed business for the Committee for the remainder of the academic year. It APPROVED a proposal for the Committee to receive updates from the School of Science and Marketing and Advancement and on the risk area of wellbeing at its May 2024 meeting. **ACTION: Secretary**
- 49.2 The Committee also APPROVED a proposal that it should confirm key business items on a rolling basis, with business for the next two meetings agreed at each meeting. **ACTION: Secretary**

## 23/50 Incident, Near Miss and Fire Data Report

### SAF23-P54

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

## 23/51 Minutes of Sub-Committees

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

### SAF23-P55

Chemical Safety Committee (18<sup>th</sup> September 2023)

### SAF23-P56

GM and Biosafety Committee (24<sup>th</sup> July 2023)

### SAF23-P57

Health, Safety and Environment Statutory Compliance Sub-Committee (7<sup>th</sup> September 2023)

### SAF23-P58

Non-ionising Radiation Safety Committee (27<sup>th</sup> February 2023)

### SAF23-P59

Radiological Protection Sub-Committee (26<sup>th</sup> September 2023)

### SAF23-P60

Sustainability Sub-Committee (23<sup>rd</sup> May 2023)

## 23/52 Dates of Meetings in 2023/24

Tuesday 6<sup>th</sup> February 2024, 14.00-16.00

Wednesday 15<sup>th</sup> May 2024, 13.30-15.30



## Terms of Reference and Composition of HSE's Sub-Committees for 2023/24

Origin: Secretary

### Action Required:

- (i) **To NOTE the unchanged terms of reference and composition for the following sub-committees:**

Chemical Safety Committee

GM/Biosafety Committee

Health Safety Environment Statutory Compliance Sub-Committee

Non-Ionising Radiation Protection Committee

Radiological Protection Committee

- (ii) **To NOTE that the terms of Reference and composition of the Sustainability Sub-Committee have changed. The changes have yet to be formally ratified by the Sub-Committee. Final changes will be confirmed by the Sub-Committee following a forthcoming Strategy and Governance review.**

(i) **To NOTE the Terms of Reference and Composition of its sub-committees where these have not changed:**

(i) **Chemical Safety Sub-committee**

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 not 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 receives reports from Schools or Professional Services on chemical safety.
- Review guidance documents and protocols to ensure compliance to all relevant chemical safety and hazardous waste 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**

Chair	AACME academic
H&S Service	SSDO Chemical Safety officer Fire Safety Officer
FM	DAP for LEV
Sustainability	Environment Manager



Technical Reps from:  
School of Social Sciences  
Wolfson MEME  
Science  
AED  
ABC

Academic representation from:  
AACME  
Wolfson  
Science  
SDC representative  
STEM lab manager  
DAP for DSEAR  
PhD student representative

(ii) **GM/Biosafety Committee**

Terms of Reference and Membership to GM/Biosafety Committee

**Committee Membership**

The GM/Biological Safety committee met for the first time on 21<sup>st</sup> March 2016. It was recognised that although the committee will meet twice a year on general principle, the committee may need to meet more regularly at first to align all the compliance involved with Biological, Genetic Modification and Human Tissue Act legislation into a consistent university wide system.

Member of the GM/Biological Safety Committee consists of:

Chair: SSDO  
University Biological Safety Officer  
Designated Individual of HTA licence  
Health, Safety & Risk Manager  
Environmental Manager

**School Representation:**

Wolfson School x 3

SSEHS x 3

Civil & Building x1

School of Science x2

**Terms of Reference**

- Review information and ensure that adequate discussion takes place to ensure appropriate control measures and containment is in place
- Review policy, guidance documents and protocols to ensure compliance to all relevant Biological/GM legislation
- Peer review risk assessments and aid in the classification of genetic modification work
- Review Audits undertaken across the relevant areas within Schools.
- Ensure systems and procedures align accordingly with the Human Tissue Act and association HTA committee
- Report to the Health, Safety & Environment Committee

### (iii) Health, Safety, Environment Statutory Compliance Sub-Committee

#### 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

#### Membership

Director of Maintenance, Engineering and Sustainability	Rob Sparks
University Compliance Engineer and DAP Asbestos Deputy	Paul Walker
University Health, Safety and Risk Manager	Mike Haynes-Coote
DAP Gas	Jonathan Cripps
DAP HV Electrical	Adam Slater
DAP LV Electrical	Matthew Chadwick
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	Vedika Bansal

#### Right of Attendance:

Director of Estates and Facilities Management	Graham Howard
---	---------------

#### 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:

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

## 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

(iv) **Non-Ionising Radiation Protection Committee**

**Composition of the Committee:**

Chairperson:	Dean of Science
SSDO	Julie Turner
H&S Service	Oliver Preedy
Laser Safety Adviser	John Tyrer

School Laser Safety Officers from:

AACME

Wolfson

ABC

AED

Design School

Science

SSS

School representatives for EMF/UV areas:

AACME

Science

Wolfson

**Terms of Reference**

Review information and ensure that adequate discussion takes place to ensure appropriate control measures and containment is in place

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

## (v) **Radiological Protection 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.

- (ii) **To NOTE that the Terms of Reference and Composition of the Sustainability Sub-Committee have changed. The changes have yet to be formally ratified by the Sub-Committee. Final changes will be confirmed by the Sub-Committee following a forthcoming Strategy and Governance review.**

**Purpose:**

The **Sustainability Sub Committee (SSC)** exists to oversee the development and delivery of sustainability in support of the University Strategy, the Sustainability Strategy and the wider sustainability agenda. It oversees the policies, guidance and action plans which support the Sustainability Strategy and make up the EMS (Environmental Management System) as well as acting as the Management Review Group for the EMS. It co-ordinates the University's activities and responses in this area reporting into the Health, Safety and Environment Committee such that it ultimately reports through to Council providing visibility, overview and assurance in these areas.

**Aims: (and measure of success)**

The Sustainability Sub Committee aims to:

- Support delivery of the Sustainability elements of the University Strategy and the contribution sustainability makes to the overall strategy.
  - Measure: Any evidence specific to delivery of the University Strategy
- Oversee the development and delivery of the Sustainability Strategy.
  - Measure: Strategy delivered by December 2022
  - Measure: Development and delivery of an annual Sustainability Action Plan
- Provide direction on the development and delivery of policies, guidance and action plans which support the Sustainability Strategy across research, teaching, enterprise and operations.
  - Measure: the number of policies, guidance and action plans developed and delivered
- Receive reports on the progress of the above from the relevant stakeholders.
  - Measure: detailed progress reports against action plans to be received from at least 6 key areas during the course of the year selected from:
    - Waste & Resources
    - Emissions and Discharges
    - Travel & Transport
    - Biodiversity
    - Educating for Sustainable Development
    - Sport
    - Procurement
    - Food (Catering & Retail)
    - Imago
    - LSU
- To receive reports on the EMS, undertake Management Review of its progress and provide guidance on its continual improvement.
  - Measure: Completion of the EMS Management Review in May
- To ensure compliance with our Sustainability obligations and review performance against best practice in the sector and more widely.
  - Measure: Completion of our Sustainability obligations which currently include:
    - Sustainability Leadership Scorecard
    - Sustainable Development Goals Accord
    - ISO14001 Obligations

- People & Planet Green League (not a formal obligation yet)
  - UI Green Metric (not a formal obligation yet)
- To monitor national and international legislative and policy developments, and be advised on their implications for the University.
  - Measure: Maintain legal compliance
- To receive reports from and provide guidance to any subgroups of the SSC.
  - Measure: Maintain and develop subgroups of the SSC
- To report after each meeting to other appropriate sub committees and committees on any related matters as required.
  - Measure: Number of reports to other appropriate sub committees and committees
- To provide an annual report to Senate and Council and ensure that Senate and Council are provided with the information required to discharge their duties around Sustainability and Environmental Compliance.
  - Measure: Delivery of an annual report to Senate and Council

**Reports to:**

- Health, Safety and Environment Committee and other Committees as required.
- Representations may also be made by the Chair to ALT and PSLT

**Works alongside:**

- The Loughborough Net Zero Group.
- The Health, Safety and Environment Compliance Sub Committee.

**Sub-Groups:**

The SSC will receive reports from and provide guidance to:

- The Biodiversity Working Group (includes the Woodland Management Group).
- Transport Sustainability Group.
- Any Task and Finish Groups that shall be created to support delivery of the agenda.

**Meets:** 3 times per year



### Membership of the Sustainability Sub Committee:

Position:	Role:	Representative:
<a href="#">APVC CC &amp; NZ</a>	<a href="#">Chair</a>	<a href="#">John Downey</a>
<a href="#">APVC CC &amp; NZ</a>	<a href="#">Deputy Chair</a>	<a href="#">Kathryn North</a>
Director of Estates & Facilities Management	<a href="#">Chair Oversight of the E&amp;FM Operations and the Carbon Emissions</a>	Graham Howard
Director of Maintenance, Engineering & Sustainability	<a href="#">Deputy Chair Oversees the work of the Sustainability Team</a>	Rob Sparks
<a href="#">Acting Sustainability Manager</a>	Convenor. Reports on Strategy, Travel & Biodiversity	<a href="#">Robyn Reeve Elliott Brown</a>
Environmental Manager	Secretary. Reports on Waste, Resource Efficiency, Pollution Prevention, Compliance, EMS	Nik Hunt
A Dean	Member	Paul Conway
Operations Manager(s)	Member.	Ruth Casey
<a href="#">STEER Centre Manager</a>	<a href="#">Member – interest in links to Sustainable Research</a>	Judy Billington
<a href="#">Schools Loughborough in London</a>	<a href="#">Member.</a>	<a href="#">Mmitul Shah</a>
Academic with Sustainability interest	Member. Reports on Education for Sustainable Development (ESD)	Rob Wilby
Snr E&FM Manager	Member. Reports on Sustainable Construction	Martin Channell
Energy Manager	Attendee when required. Reports on Energy but this will, on the whole, be covered the LUNZ Group	Greg Watts
<a href="#">Sustainable Travel Officer</a>	<a href="#">Attendee when required. Reports on Travel &amp; Transport</a>	<a href="#">Elliott Brown</a>
Catering representative	Member. Reports on Sustainable Catering	Dan Brazil
Retail representative	Member. Reports on Sustainable Retail	Karl Christison
Procurement representative	Member. Reports on Sustainable Procurement	Anna Ellis
Organisational Development representative	Member. Reports on Sustainability Training	Sarah Williamson Matt Hope
Sports representative	Member. Reports on Sustainability In Sport	Mark Davies
Imago representative	Member. Reports on Sustainability across the imago venues	<a href="#">Steve Powell Mike Hart</a>
Student Union representative	Member. Reports on Sustainability for the Students Union	<a href="#">Danny Smith Georgia Whelan</a>
Planning representative	Member	Dawn Matthews
Marketing & Advancement representative	Member	Helen Clarke
Technician representative	Member	Imogen Heaton
Student representative	Member	TBC
Staff representative	Member	TBC

**In Attendance:** Administrator to assist with minutes if required.

### Further Context:

The Terms of Reference and Membership are designed to reflect the sub-committee's role to oversee and govern the University Sustainability agenda with particular focus on:

- Creating a sustainable campus.
- Developing sustainable students, staff and visitors.
- Encouraging the development of a Sustainable curriculum, research and enterprise.
- Supporting a sustainable community.

In particular the sub-committee shall consider and support the institutional theme **Climate Change and Net Zero** across the core areas of:

- Research & Innovation – we will grow our research and innovation capacity, in areas such as clean energy and the circular economy, to enable the university to play a leading international role in responding to the climate emergency.
- Education – we will develop students who have a high degree of climate change awareness and carbon literacy so that they can take responsibility for sustainable actions in themselves and others.

- EDI – will help diverse communities around the globe adapt and prosper in a changing world climate.
- International – we will bring together our creative, analytical and technological expertise to accelerate a reduction of global emissions.
- Sport – we will use our expertise and influence to help sporting policymakers and organisations in their transition to net zero.
- Partnerships – we will seek and engage strategic partnerships that will strengthen our response to the climate emergency and help accelerate progress towards net zero.
- University – we will engage staff, develop our estate, and change working practises to achieve net zero emissions from our own operations.

**Sustainability:** meeting our own needs without compromising the ability of future generations to meet their own needs considering the three main pillars of Environmental, Economic and Social. Social Responsibility is a key part of Sustainability.

Sustainability within the University Strategy is delivered through the Sustainability Strategy which can be driven by as well as supporting the 17 UN Sustainable Development Goals (SDG's). Loughborough University is signed up to the SDG Accord the purpose of which:

1. is to inspire, celebrate and advance the critical role that education has in delivering the Sustainable Development Goals (SDGs) and the value it brings to governments, business and wider society.
2. is a commitment learning institutions are making to one another to do more to deliver the goals, to annually report on each signatory's progress, and to do so in ways which share the learning with each other both nationally and internationally.

The 17 SDG's can be found here: <https://sdgs.un.org/goals>

**These proposed final Terms of Reference should be reviewed in 12 months as part of the check of the effectiveness of this Sub-Committee.**

## Health, Safety and Environment Committee



### Director of Health, Safety and Wellbeing's Report

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

#### Executive Summary

Summary of activity for noting.

#### Other Committees Consulted

None

#### Equality Diversity and Inclusion Considerations

#### Paper Details

##### Action Required:

None – For information / Assurance purposes

## Serious Incident

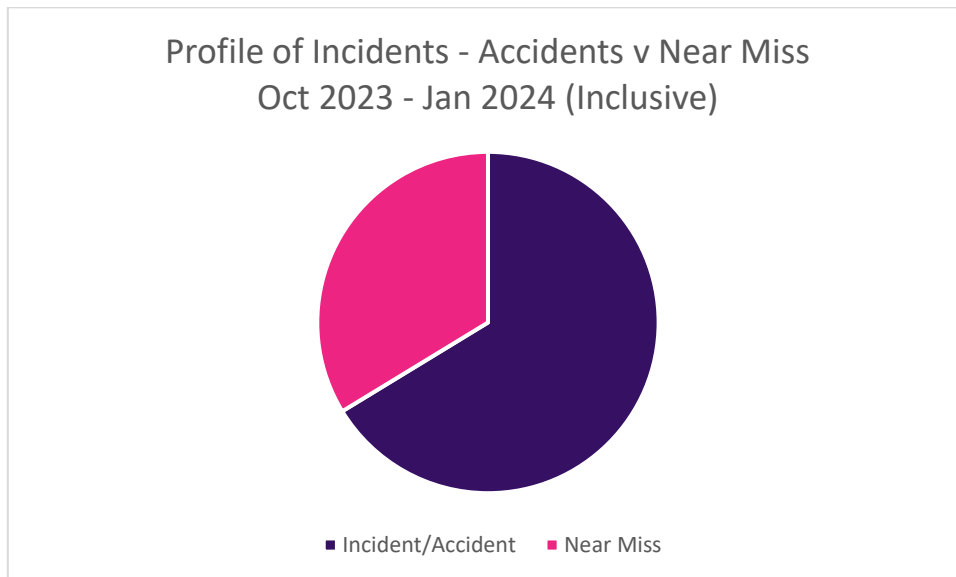
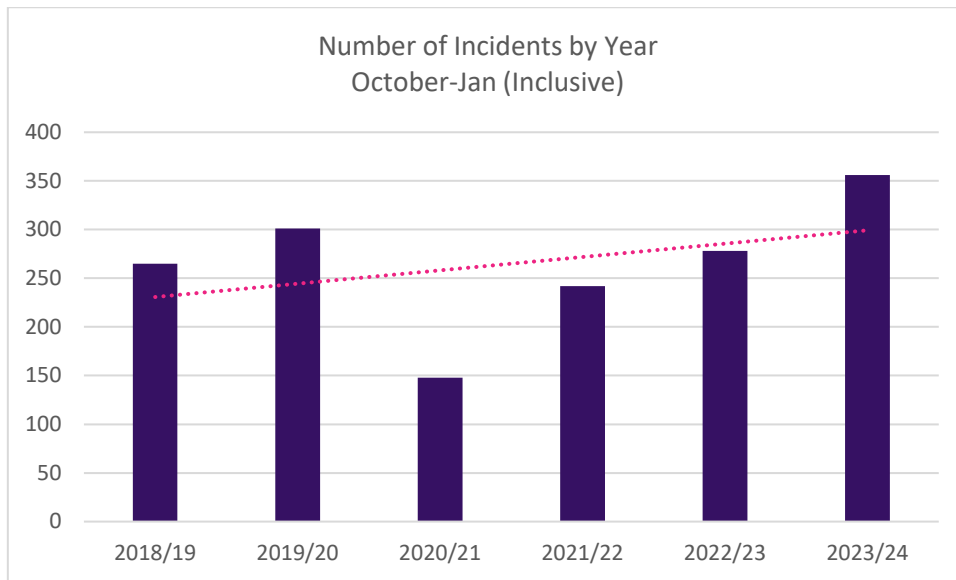
There were 2 RIDDORs Reportable incident in the reporting period.

HSE Ref	Date	Org Unit	Accident Type	Type of RIDDOR	Summary
AF12412CF4	18/11/2023	Residential Services	Struck by Fixed or Stationary Object	Injury to non-worker taken directly to hospital for treatment	Student opened the wardrobe. The door fell off it's hinges, causing a small cut to the student's right eyebrow.
	19/12/2023	Imago Ltd	Struck Against	7 Day Work Related Incapacitation Injury	Accidentally struck hand against walk in fridge when closing fridge door. Impact has swollen lower knuckle on right hand.

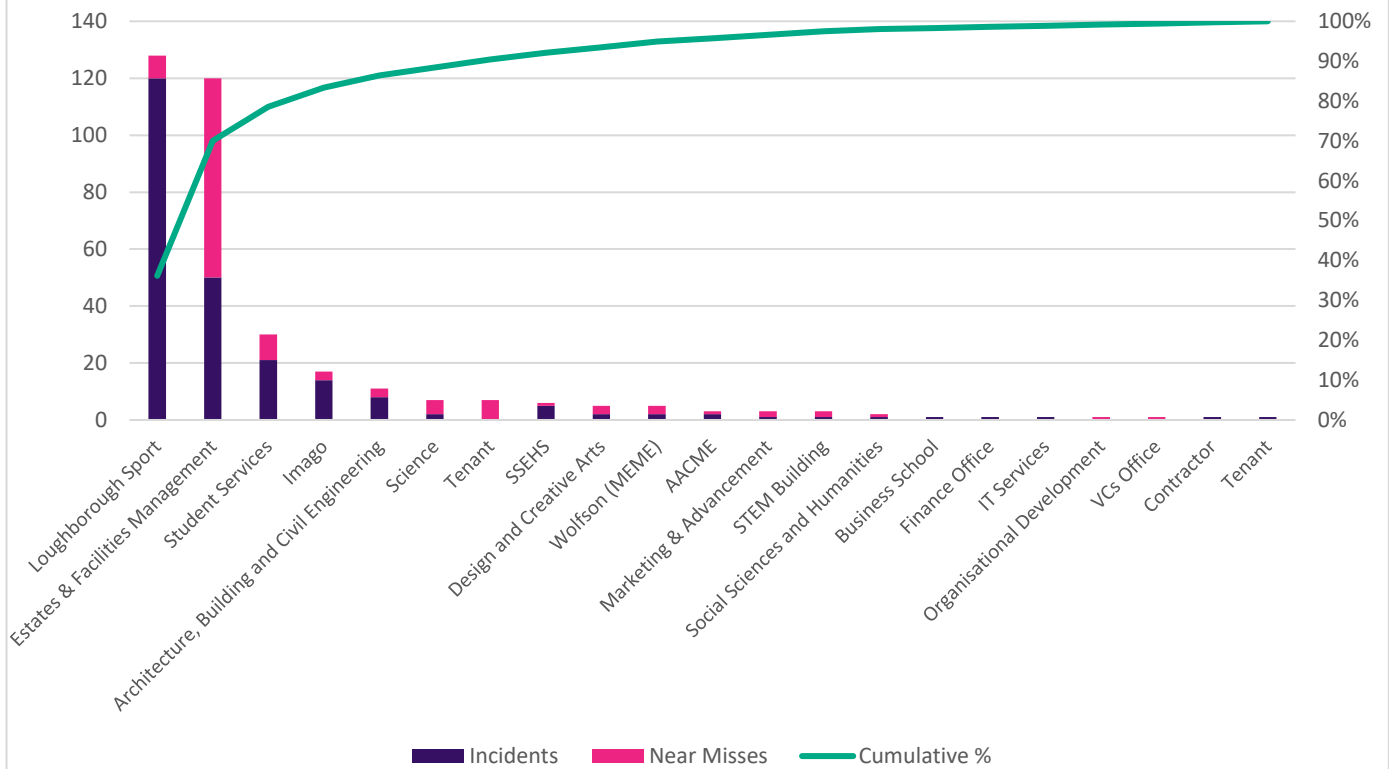
There were three incidents and two near misses rated as high severity by the Health and Safety Service's internal rating. One of these was taken to Incident Review Panel, involving an injury to a student participating in an Athletic Union sport.

Ref	Date	Org Unit	Accident Type	Summary
5334	25/10/2023	Athletic Union	Sport	2 members were having a sparring round in training at MAC. Person X lands head kick ( from multiple accounts not with excessive force) as person Y made a movement the direction of the kick. Person Y remains conscious

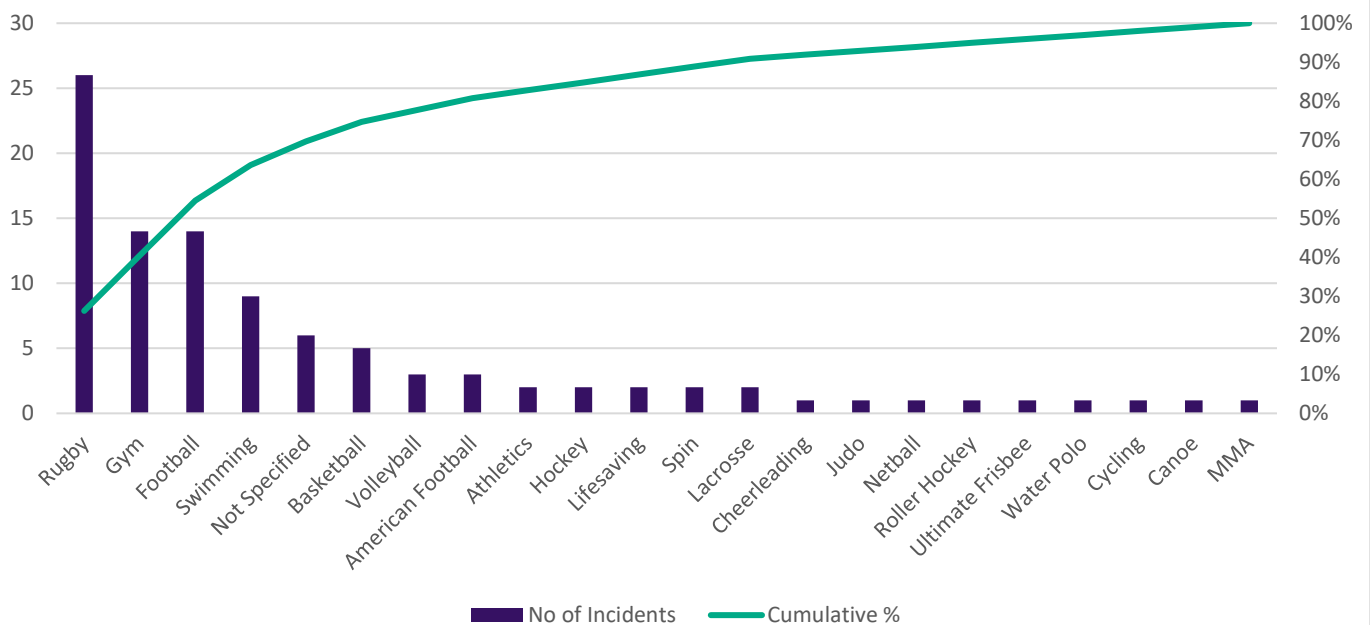
Incident Data and Graphs (excluding Fire Alarm Incidents)



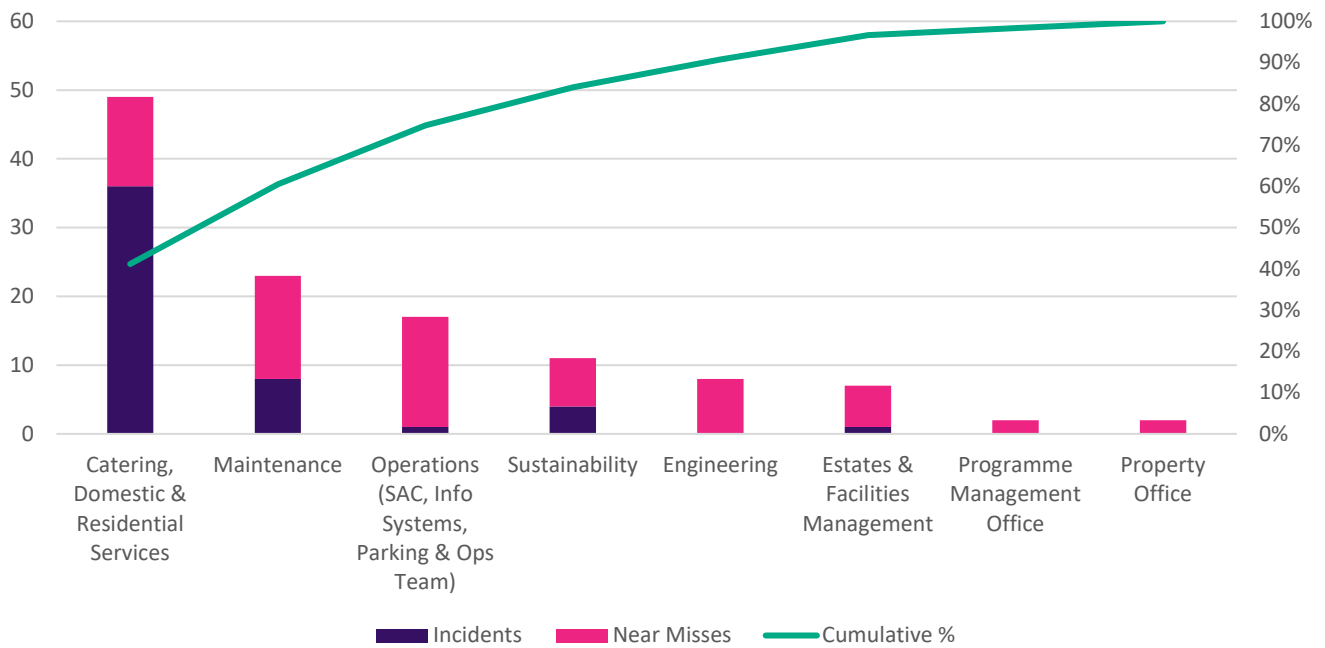
### Pareto Analysis of Accidents and Near Misses by School or Department Oct 2023 - Jan 2024 (Inclusive)



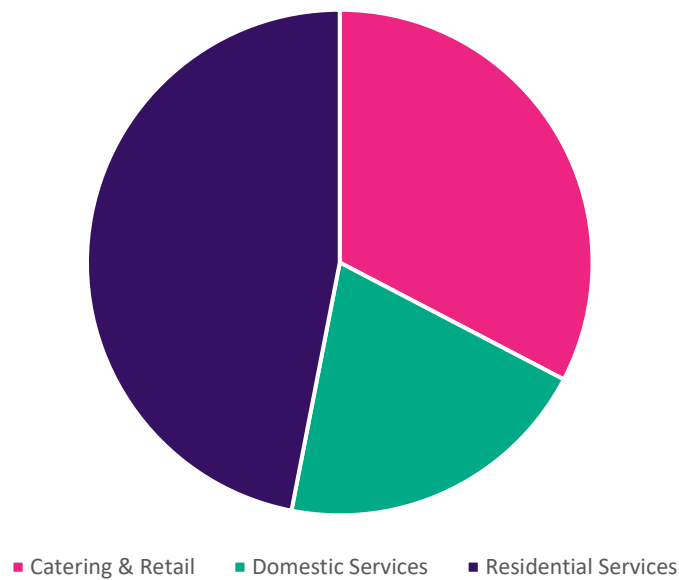
### Pareto Analysis of Sport Participation Injuries Oct 2023-Jan 2024 (Inclusive)



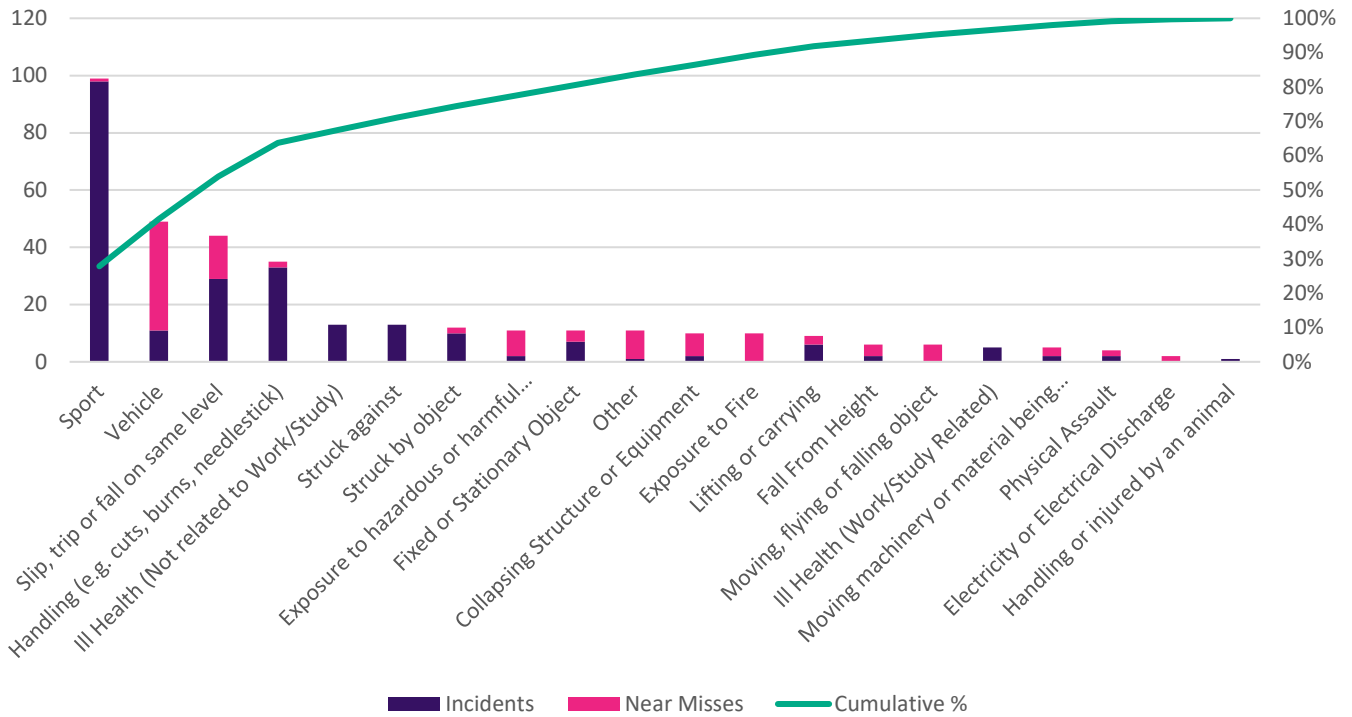
### Pareto Breakdown of EFM Accidents and Near Misses Oct 2023 - Jan 2024 (Inclusive)



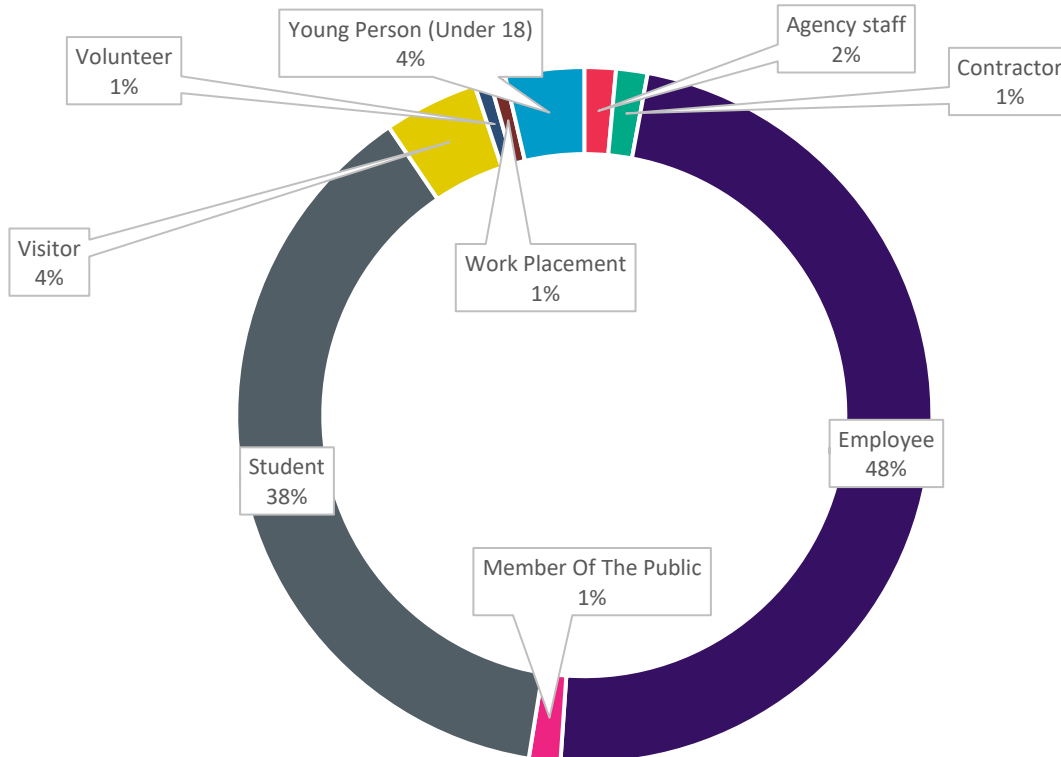
### Breakdown of Incidents and Near Misses in Catering, Domestic and Residential Services Oct 2023 - Jan 2024 (Inclusive)



### Pareto Analysis of Accidents and Near Misses (Oct 2023-Jan 2024 (Inclusive))

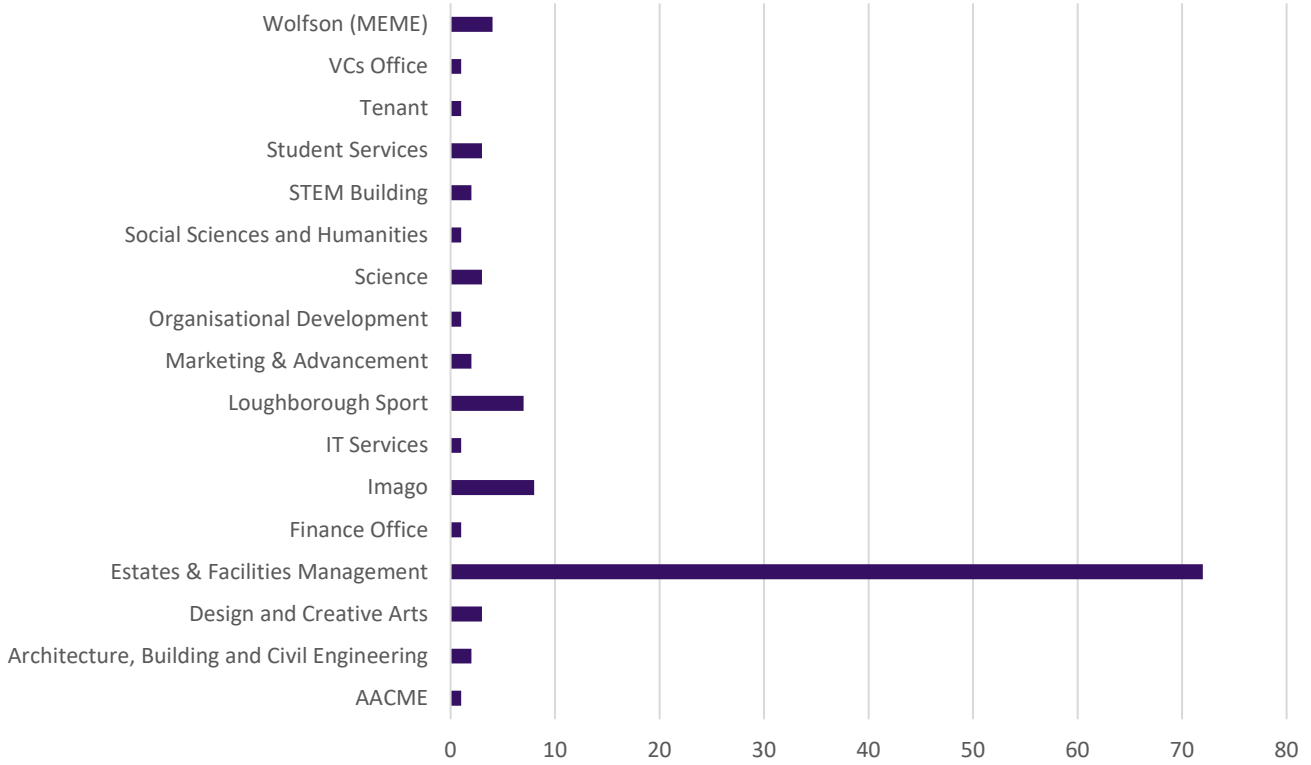


### Profile of Persons affected by Accidents (excluding sport participation) Oct 2023-Jan 2024 (Inclusive)

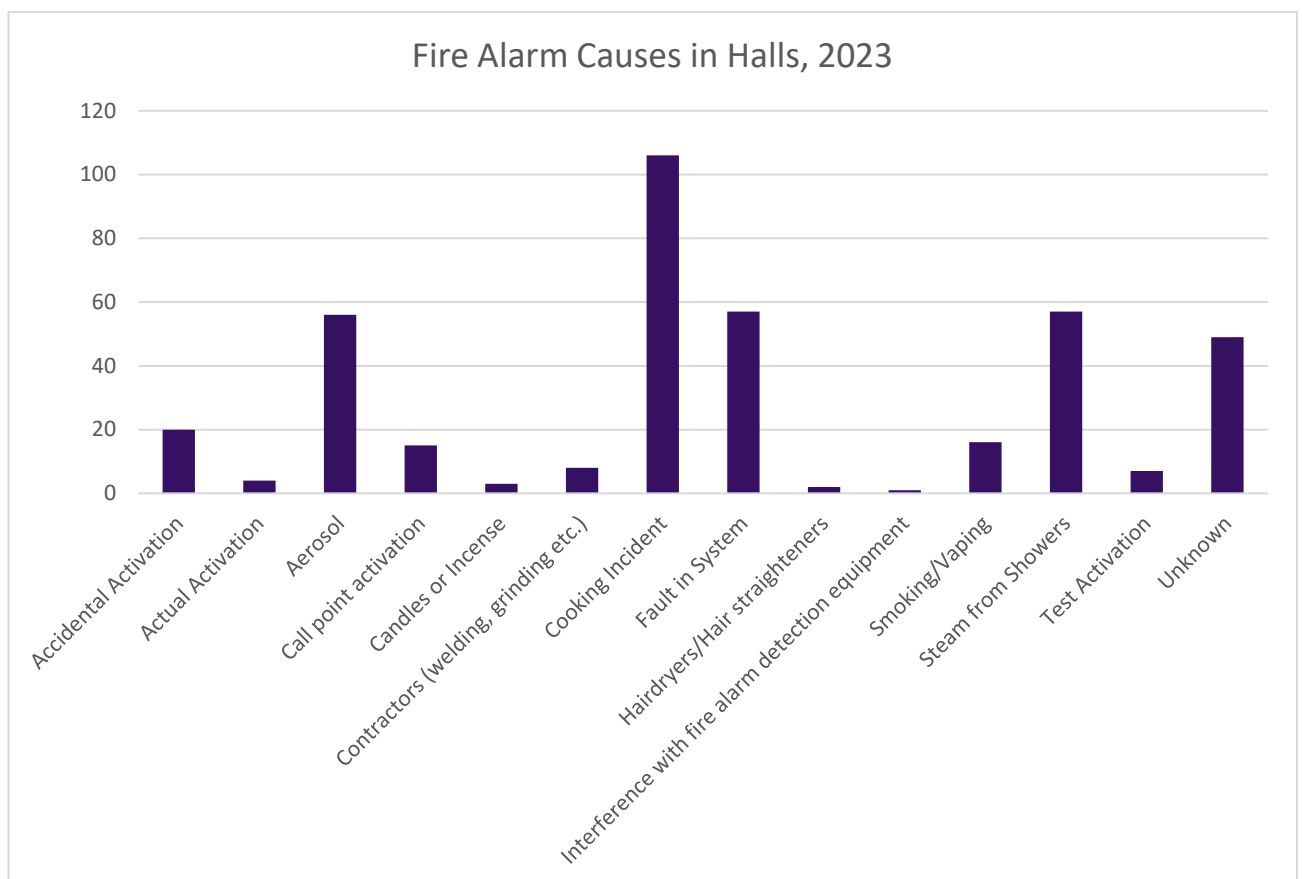
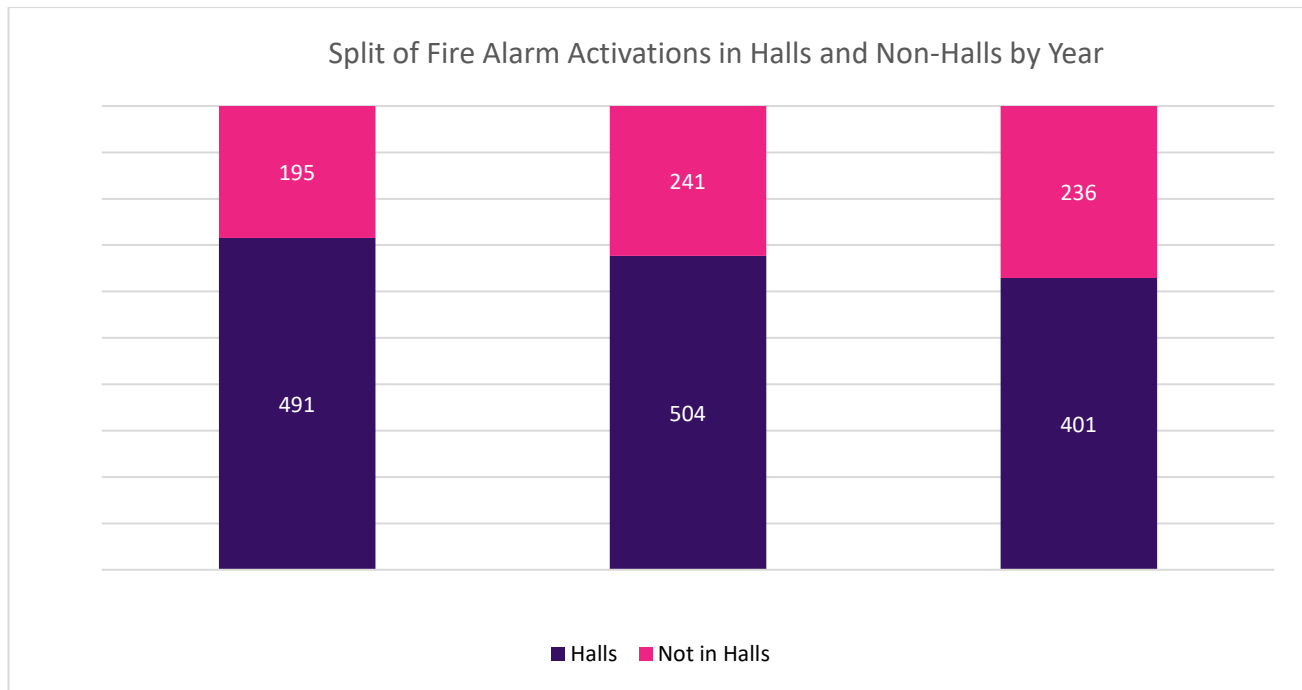




## Accidents Affecting Employees by Department Oct 2023 - Jan 2024 (Inclusive)



## Fire Alarm Incidents



### Fire Alarm Causes in Non-Halls, 2023

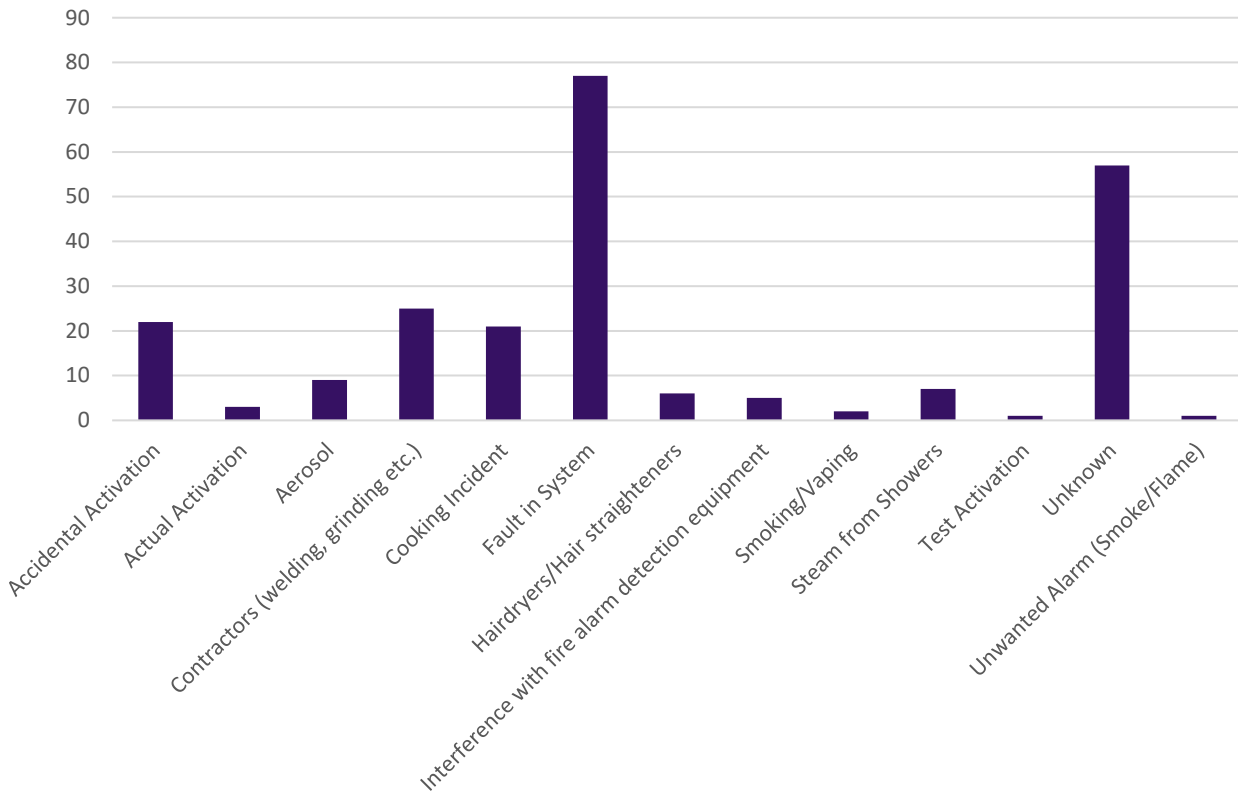
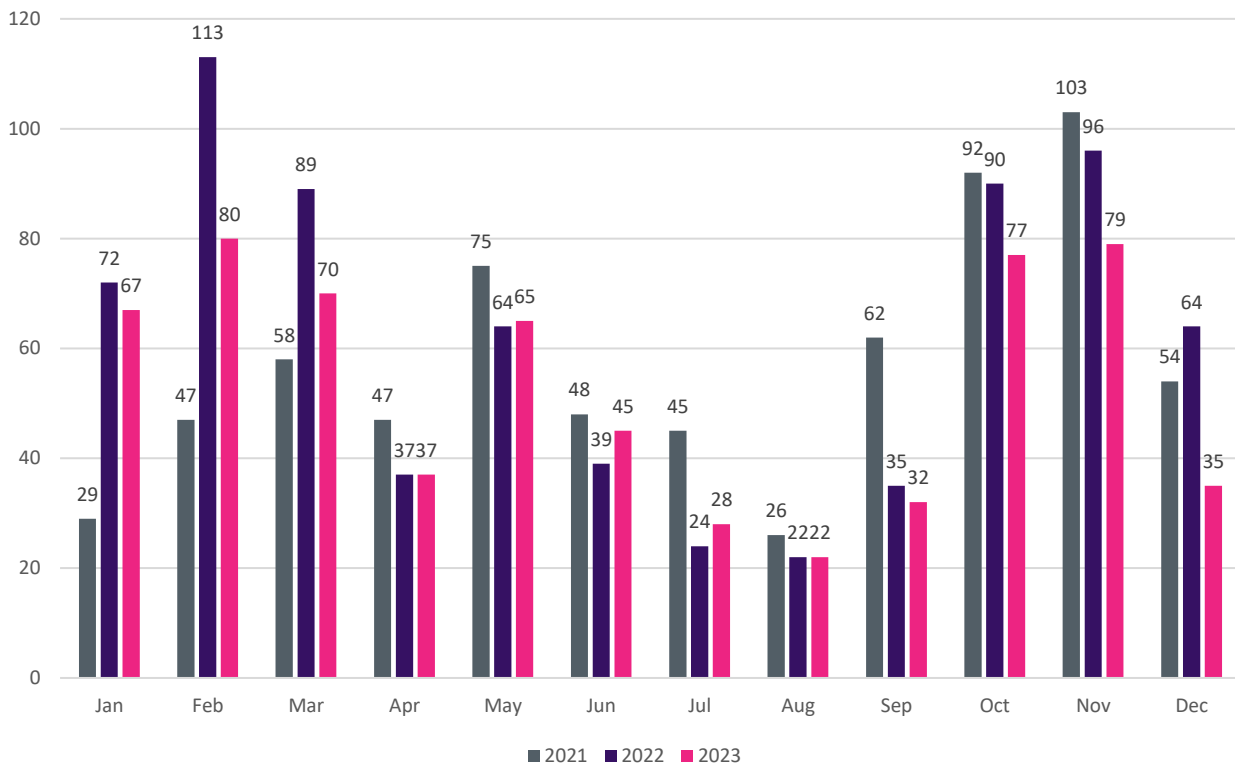
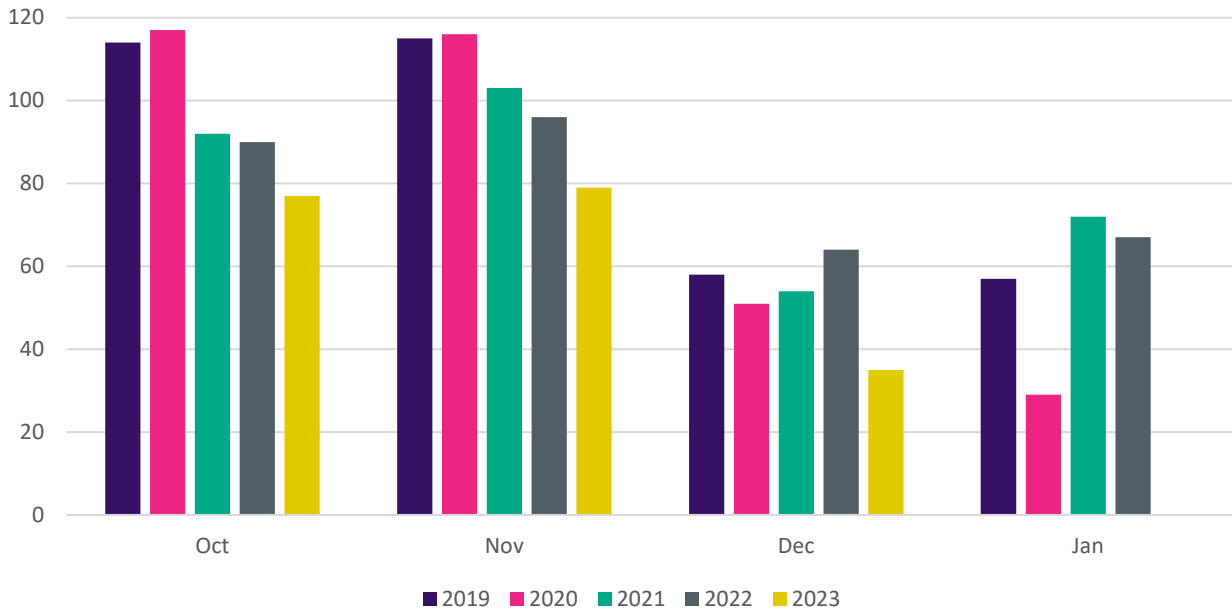


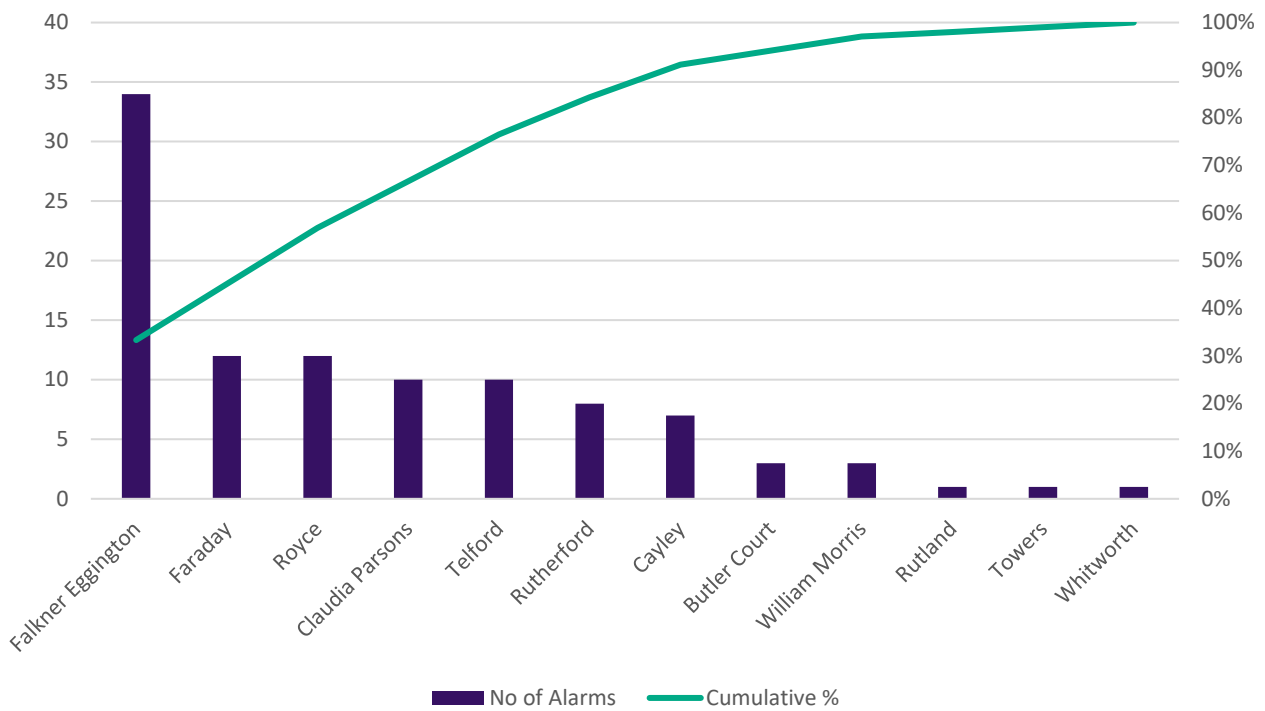
Chart to compare monthly fire alarms in 2021, 2022 and 2023 by month



Analysis of Fire Alarms for the reporting period, last 5 years



Pareto Analysis of Fire Alarms in the Reporting Period





## AGENDA

### CSC24-M1

#### Details of meeting

Details of the meeting held on **Tuesday 16<sup>th</sup> January at 10.00** on Microsoft Teams

#### Present and Apologies

**Present:** Oliver Preedy (Chair), Pauline King, Michael Wraight (Item 5 only), Nik Hunt, Sarah Wappat, Tony Goodall, Chris Burton (Secretary)

**Apologies:** Helen Willcock (Chair), Julie Turner, Keven Smith, Simon Kondrat, Sarah Van Zoelen, Chris Harris, Jake Bowers, Jimmy Wright, Mark Taylor, Sean Creedon, Rachael Redford

#### Approval of Minutes

The committee APPROVED [CSC-M2](#), the last meeting held on 18<sup>th</sup> September 2023.

#### 24/1 Matters arising from the minutes

Ref	Action	For	Update	Status
23/2	Check composition of group and liaise with Helen Willcock to approach Deans to make this fit for purpose	Chris Burton	Action was marked as complete but due to the low turnout this was reopened to be looked at again if attendance remains low	Ongoing
23/4	Setup group to discuss a software solution to managing chemical inventories	OP	The group has been setup, and includes OP, TG, PK. SW was also happy to be involved.  <b><i>There was an action for OP to schedule a 30 minute Teams meeting for the group to kick things off.</i></b>	Ongoing
23/25	To look into whether central cryogenics training might be required	TG/OP	There was a feeling that cryogenics training is available but linked to compressed gas training that is more detailed than required. PK had received feedback the compressed gas training overran and the cryogenics was subsequently delivered without the practical element.  <b><i>There was an action for OP to ask for training feedback from Rebecca Ford and to feedback at the next meeting.</i></b>	Ongoing

## 24/2 Communication and best practice

No comments

## 24/3 Regulatory updates – OP

Chemical Weapons returns are now due. OP thanked those that have already sent these in.

## 24/4 Fire Safety Update - JH

JH was unable to attend but sent apologies and said that there were no chemical updates but that controlled evacuations went very well in November.

## 24/5 LEV Update - MW

MW updated the committee that the University's maintenance team were becoming more familiar with LEV's and have therefore been able to fix a number of routine issues in-house – reducing cost and lead times associated with using a contractor.

The maintenance contract will go out to tender so anyone looking to have input in this process should contact MW.

## 24/6 Centralised chemical safety audits - OP

Rae Denham will be joining the Health and Safety Service and the Chemical Safety Committee at the end of January. This should give capacity to OP to begin 2024 audits, beginning with the COSHH audit and progressing to walkarounds.

## 24/7 Hazardous waste/Waste Disposal – NH

There are no major issues with hazardous waste or waste disposal. NH has a quote to remove the 10 pallets of out of date hand sanitiser from the chemical waste store.

The contracts for clinical and hazardous waste will be out for tender this year. Anyone interested in being part of the process should contact NH.

Access to the chemical waste store was discussed. There is a lack of control of this which should be taken under control by changing the lock. E&FM are planning to change the door but this isn't necessarily needed, as long as we can control access.

***There was an action for OP to pickup changing the locks with E&FM colleagues***

## 24/8 Incidents/Accidents and Near misses involving chemicals – HW/OP

OP raised two near misses. The second of which was a report of a cleaners' cupboard being left unlocked overnight. There was a reminder to be vigilant with how we secure chemicals.

The first incident was an over order of sodium metal that was delivered and left outside. The sodium had been ordered by a student and had all necessary approvals, even though it was ten times the annual usage.

This led to a conversation about approval processes for orders – Science are soon to be rolling out a new process, so ***an action was taken for PK to feedback regarding the implementation of this at the next committee.***

## **24/9 Any other Business**

None

## **24/10 Future meeting dates (proposed)**

06/05/2024

13/09/2024

22/01/2025

# Health Safety Environment Statutory Sub Committee Meeting

*(Previously LU DAP COMPLIANCE MEETING)*



## Loughborough University

## MINUTES HSESSC

### Notice of meeting

The meeting was held on **Monday 8<sup>th</sup> January 10:30 am**, at the **Bridgeman Building, BRI.2.11**.

Vedika Bansal, Secretary

### Present and Apologies

To note attendance and apologies.

**Apologies: Dave Green, Matthew Chadwick, Jonathan Cripps**

**Attendees: Paul Walker, Rob Sparks, Carolyn Kavanagh, James Holt, Nik Hunt, Oliver Preedy, Scott Phillips, Matthew Polkey, Gagan Kapoor, Adam Slater, Michael Wraight**

### 1 Previous Meeting Minutes

#### **HSESSC**

The minutes from the previous meeting were confirmed as a true and accurate record.

### 2 Committee Effectiveness

The Terms of Reference was reviewed to reflect the committee for the new year. The committee agreed to add both, the DAP webpage and circulation of the Master Project to ensure Project Managers' compliance with refurb, on to the Action Tracker.

### 3 Review of Individual DAP Trackers – Selected DAPS

#### **HSESSC2 - DAP Trackers**

Selected Daps to provide a short verbal update on their individual trackers as below:

#### 3.1 – LOLER (Dave Green)

- A new training provider will now deliver LOLER Awareness training. Technical schools are being encouraged to undergo IHASCO training. Technicians will be going through level-2 training which fits into our 4-level training plan.
- Annual re-inspections are due to be carried out in June by CraneServe. Roller shutter doors have been inspected and need replacing.
- A sample audit has been carried out. In the next couple of months, audits for schools such as CIVIL and ACME will be conducted. These are technical schools with more equipment deemed as high risk. Spot check audits are now in progress.
- LOLER's policy document has been updated.
- Asset tags are now in place for all existing equipment.



- PNA's, while still an issue, are gradually coming down and currently run at 6%.
- Access to a central training register (iTrent) to be investigated.
- A new LOLER DAP to be identified and trained. This is being discussed during individual DAP meetings.

### 3.2 – Fire (James Holt)

- Fire door management has been a major area of progress. A contractor is investigating the doors/buildings/RAG ratings. Not all doors are up to standard as some are fifty years old.
- Fire extinguishers are tested on an annual basis with tag colours changing every January.
- Fire dampers continue to be a challenge as inspections have fallen back a bit. Fire strategy drawings are being used to identify important doors.
- Emergency lighting also continues to be an issue. From a risk point of view, it is usually daylight during evacuations. Priority is being given to student accommodation buildings.
- Alert systems and refuge points continue to be maintained. Lighting audits are done on annual basis.
- Organisational Development and Health & Safety are working together to catch up workers with mandatory fire at work training.
- We now have 30-50 people undertaking Fire Marshall training each year. This is from halls and dining.
- Section 156 in the Building Safety Act states that all fire risk assessments need to be recorded. It has been communicated with tenants at LUSEP that these will need to be written down/formally recorded going forward.
- Financial cost of not getting it right the first time is evident as we work on getting student accommodation up to standard.

### 3.3 – Pressure (Matthew Polkey)

- Authorised Person training and training by the mechanical team is underway. 6 people are up and running and starting to learn pressure systems to help Authorised Persons. Heat network energy assessor training has been completed.
- We have joined a couple groups which help with being compliant and knowing what is changing with pressure systems.
- The Sir Frank Gibb boiler has been inspected. Some black tubes needed to be replaced. This is now up and running.
- Pipework at Holywell which was at high risk of failure has been replaced. Valves have been replaced and calorifiers have been sorted out. Pumps at Holywell have also been refurbished and this will continue through the summer months.
- Cost saving with pumps at Central Boiler House as FLOMEC lifted and repaired these for half the price (£35,000).
- Plates that burst/were leaking at CHP, new boiler plant and Towers dining have all been swapped out for new ones.
- New energy hub at Whitworth is being brought online onto the portal.
- District heating at Towers and Whitworth is being altered, data to be shared in due time.
- New Boiler Plants in Towers, Martial Arts, Wavy Top, S Building, GG block are being redone.
- Increasing number of jobs are being done yearly, with 71% jobs clearing and 19.5% being unavailable. These might have been sorted out the next day/at some point due to not being able to get into the room/unable to isolate/unable to carry out role.
- Pressure systems and heat network policy to be reviewed and updated.
- Audits of pressure systems across campus to start later this year.
- District heating drawings are being updated to mark out valves that need to be lifted for emergencies.
- The BES Portal is being updated with portion of campus missed out during the initial audit.
- Some issues that have been identified are, pipework getting older, more wear and erosion on pipes, system isolations, growing inspection list and increasing regulations.

### 3.4 – DSEAR (Oliver Preedy)

- Audits from last year show a good level of compliance. We have been involved with DSEAR related projects across campus such as Wolson's Hydrogen work, ensuring safe extraction and testing practices. We are also building a generalised audit template to make sure we are getting around all areas on campus.
- DSEAR Awareness Training/IHASCO is being formalised to better manage flammable gases in buildings. People managing these in schools are being asked to undertake HSE training.
- Survey sent out to LUSEP tenants received 30 responses from 81 tenants. This is still in progress and data from the survey will be shared with all DAPs.
- The amount of stored Hydrogen and Methane on campus is slowly going up. This might be an issue going forward as Methane has a carbon footprint of around 21. Currently, Methane is converted to Hydrogen and released in small quantities.
- Hydrogen is being released as a byproduct through the vents at the swimming pool. FRAs are being carried out to check if this is at small levels.

#### 4 Two Year plan

- The current 2-year plan ends next month and is available for viewing as has been all year.
- There has been substantial progress in three elements. An element that has not made progress is Archibus which should pick up in the new year.
- The next 2-year plan is being formulated and will be updated monthly. A new slide about legislative changes to be added to the 2-year plan.

#### 5 Score Card

- The latest score card was shared with all in the meeting followed by a brief overview of each area.
- Asbestos has made good progress with the register and managed to remove 400-500 items off the list.
- Areas such as DSEAR and PUWER are showing improvement. PUWER has completed a full cycle around the university and has a list of actions which will take some time to get through.
- F Gas, Pressure Systems, HV Electrical and Asbestos are green and improving.
- Areas such as Legionella and Fire still have a lot to do to get to green. 100% of RAs for Legionella have been completed within 3 months of the job.
- Gagan Kapoor has shared Food Hygiene's Environmental Health and Internal Audit with the committee.

#### 6 Any other Business

The compliance newsletter will be published in the next couple of weeks.

The committee discussed ways to be continually up to date with new regulations and legislations for each area. Services such as the weekly digest from HSE, Barbour, ROCA and their benefits were discussed.

#### 7 Future meeting dates

The next meeting is scheduled for **Monday 8<sup>th</sup> of April 2024 at 10:30 am.**

# Non-Ionising Radiation Committee



## AGENDA

### NIR23-A2

#### Notice of meeting

The next meeting of the Non-Ionising Radiation will be held on 4<sup>th</sup> October 2023 on Microsoft Teams.

Chris Burton, Secretary

#### Present

Claudia Eberlein (CE), Oliver Preedy (OP), Andrew Edwards (AE), Joanna Bullard (JB), John Tyrer (JT<sub>y</sub>), Long Chen (LC), Mark Capers (MC), Matthew Casey (MC<sub>as</sub>), Sarah Wappat (SW), Simon Tuplin (ST), Craig Brown (CBr) and Keven Smith (KS).

#### Apologies for absence

Julie Turner (JT), Marco Peccianti (MP) and Chris Burton (CB)

#### 23/11 Minutes

##### [NIR23-M1](#)

To CONFIRM the minutes of the meeting held on 27<sup>th</sup> February 2023 at 2pm.

**Confirmed by committee as an accurate record of the meeting.**

#### 23/12 Matters arising from the Minutes

Item	Action	For	Status
23/2	Share the <a href="#">Terms of Reference</a>	CB	Complete
23/6	Share with CB any forms used for internal audits or machine checks	All	*
23/6	Setup a Team for the committee	CB	Complete
23/6	Share mandatory suppliers and approved models of laser pointers	OP	Complete **

\*Marc Capers and Simon Tuplin provided templated from Wolfson and AACME

**\*\* Action: Relaunch the laser pointer campaign and circulate information to be circulated to school and services – JT<sub>y</sub>**

---

## SECTION A – Items for Discussion

### 23/13 Update from the University Laser Safety Officer

- Loughborough hosted the University Laser Safety Forum on the 11<sup>th</sup> July 2023 with approximately 75 delegates in attendance. Stewart Robertson (HSE) gave an update on laser safety compliance within the University sector, identifying material breaches since the inspection regime started.
- Loughborough remains a centre of good practice surrounding laser safety by HSE and delegates on the UKHSA laser safety management course.
- Laser pointers remain a concern with 30% testing above the threshold limits.
  - **Comment CE:** Potential to remove laser pointers by utilising other devices for teaching purposes.
  - **Comment AE:** Provide approved laser pointers from a central store, JTy confirmed that this is the case and as part of the 23/7 this will be circulated to
  - **Comment CBr:** In addition students can bring in devices for student projects and so needs monitoring. KS highlighted Wolfson internal procedures to manage this.
  - **Action: Check with finance regarding the Agresso code for laser products and circulate with action 23/7.-OP**

### 23/14 Regulatory Updates

- No relevant legislative changes
- Updated to laser standards:
  - PD IEC/TR 60825-14
  - IEC 60825-4 (Laser guarding) have been written and expected to be released Jan 2024

### 23/14 External Audits

- No external audits, although Stewart Robertson from the HSE present for the laser safety forum and visited a facility on campus with no enforcement action taken.

### 23/15 Internal Audits

- Templates had been circulated from Wolfson and ACCME.
- JTy suggested previously meeting in person where the committee can audit an area and share best practice.
- MC informed that templates and documentation were being updated to reflect the changes in standards and would be circulated when complete.
- OP identified that the focus has been on lasers and so a standard approach should be adopted for laser audits/inspections and then adapted to other equipment producing non-ionising radiation.
- CE raised the point of capturing changes of equipment or equipment brought in not following the procurement process. All schools confirmed they had a similar process that was capable by goods in and inspection regimes.
- CE raised equipment inventories, OP confirmed the laser inventory was up to date however the other equipment producing non-ionising radiation was less complete.
  - **Action: Agree equipment that is in scope and requires an inventory, this should be risk based. Produce a proposal and circulate to the committee at next meeting for approval. – CE, JTy and OP**

## 23/16 Incidents/Accidents and Near Misses

None to report other than the near miss is SDCA reported by CBr last meeting

## 23/17 Date of Next Meeting

- 11<sup>th</sup> January 2024 at 10am

**Action: Meeting to be held in Wolfson and include a tour of the facilities to share best practice and invite comments from the committee. Arrange with KS and MC – OP and CB**

## 23/18 Any Other Business

Any member wishing to raise an issue is asked to notify the Committee Secretary.

CE thanked AE for his time on the committee as he is shortly leaving the University.

**Action: Add Shaun Atherton to the membership of the committee – CB**

Author – Chris Burton

Date – 29/09/2023



## MINUTES RPSC24-M1

### Present and Apologies

Present: Richard Taylor (Chair), Julie Turner, Mark Elsegood, Shaun Atherton, Keith Yendall, Kelly Morrison, Stephen Elliot, Kevin Bass, Sarah Bugby, Keven Smith, Oliver Preedy, Chris Burton (Secretary)

Apologies: Jo Kirk, Pauline King, Tony Goodall

### 24-1 Approval of Minutes

The minutes of [RPSC23-M3](#) were confirmed as an accurate record of the meeting held on Tuesday 13 June 2023.

### 24-2 Matters Arising From the Minutes

Item	Action	For	Update	Status
	Send practical session ideas to JT/OP	All		Ongoing
	Approach Doctoral College to allow training to be captured	OP/JT	PHD student training is not captured in iTrent. To be kept as ongoing but relates to more than just Radiological Protection.	Ongoing
23/12	Approve and note final decommissioning sign off	JT	Graham Oldham has been demolished.	Complete

[RPSC23-AT1 Full Action Tracker](#)

### 24-3 Decommissioning update and Waste Non-Compliance – JMT

Graham Oldham demolition is all but complete.

As previously minuted there were waste pipes remaining which still contained materials that were in scope to need to be disposed of by a specialist company, however as our waste had previously done down the drain, LU does not have a license for this. The decision was made to remove materials as solid waste.

Environment Agency have been made aware that we are technically in breach but have been petitioned to make an exception rather than require LU to change the license as clearly no more work will be done in Graham Oldham.

#### 24-4 Update on RADAN (HSE) – OP

RADAN is the Health and Safety Executive's system of "Notify, Registration or Consent for work with Ionising Radiation." More information available on the [HSE](#) website.

Under the system LU was required to re-register X-Ray Generators and Radionuclides. This process has been completed by JT and OP.

#### 24-5 Incidents/Accidents

SB and SE shared with the committee the issue of the auto lock not working in DAV 2.55. The issue is caused by negative air pressure in the lab and resulted in an incident (Incident Record 5567) reported by SB where the lab was found to be unlocked on multiple occasions.

Clarification that there is an issue across the floor but that Lab 2.55 is of particular concern due to the security and the safety of the sources stored in there.

SE confirmed that Estates colleagues have been to investigate and mend the issue on several occasions, and can usually resolve it in the short term, but it is a recurring fault that needs to be solved.

Rob Sparks and Michael Wraight are aware and the auto lock is currently working. **There was an action for OP to feedback at the next meeting the status of the auto lock and the steps taken to resolve it, supported by SE and SB.**

#### 24-6 Additional Protocols – JMT

JT is working with Nuclear Fuel Cycle to Office of Nuclear Regulation

An important process as we need to include any work such as research that LU is involved in even if it's not on campus or managed by LU. Failure to declare can result in a non-compliance.

JT has already written to Deans but had no response. Will do so again with responses requested to be sent to RT.

#### 24-7 Environment Agency Inspection – JMT/OP

JT has received the agenda for the EA Inspection on 30/01/2024. The inspection is set to include:

- Inventory check v Permits
- Security – both physical and accountancy/audits
- Training and Competency
- Unsealed Sources Permit
- Decommissioning Update
- A brief chat about sealed sources
- Inspection will certainly take in SB's lab, but may also wish to look at stored sources in Wavy Top and STEMLAB.

OP is meeting with SB on 25/01 to confirm everything is in place. OP also agreed to meet with SA in case STEMLAB is in scope.

JT and OP are expecting no issues with the inspection but there is likely to be a conversation about reducing LU's permit due to the low levels held. LU open to this if the permit can be varied rather than a need to surrender and reapply. This has been previously discussed with EA.

## 24-8 RPS Training Feedback – OP/ALL

Feedback was sought as the RPS training was sourced from a new supplier, [Orbital RPA](#), (specifically Chris Murdock). Feedback from OP, SB, KS and SA was wholly positive.

It was suggested that the provider could be engaged to provide mandatory annual contingency planning training. This was met with a positive response, particularly if it could be outside of teaching times and could include PHD students working with radioactivity.

## 24-9 Reports from Radiation Protection Supervisors – ALL

- **ME**

Single crystal X-Ray Diffractometer has been broken for three years. It is a significant frustration that there is no system to get this fixed.

JT is working with Dan Parsons to develop a system alongside technicians.

- **KY**

Both D2 X Ray Cabinets are out of operation. Engineer is due next week.

Zeiss 1530-VP SEM is being sold and a new piece (Tungsten SEM) is being loaned from Sci Med.

Dose meter and scintillator are out of calibration.

New badges are required. OP confirmed that new badges will be received shortly via internal post.

- **KM**

Bulb is out in diffractor cabinet – OP clarified that this is not a safety warning light.

- **KB**

Services are due in Wolfson on 29/01/2024

- **SE**

Diffractors in Science are fine.

Reminder that there are sealed sources in Physics for disposal. JT confirmed these will be collected along with waste currently stored in Wavy Top when Environment Agency respond.

- **SB**

There are two new PHD students who will require training and badges.

There was some discussion about a need for first aid training of RPS's. Are there any updates on this?

Could a new monitor be a good idea to be used in the event of an incident?

Is bringing in two new X-Ray sources. OP working with SB on this.

Has been offered a free X-Ray cabinet but there needs to be a decision on where to locate this.

## 24-10 Any Other Business

### 10.1 Access to W2.55 - SB



People with access to the lab is over 50, with the exact number not actually known. The list that has been provided is not entirely correct, but the names on there do require access. SB has concerns that this is a lot of people to keep training up to date, promote best practice, communicate changes to etc. Concerns are exacerbated by the issues with the auto lock.

There was an action in the first instance for SE to get a more accurate list from Lisa Slater and to remove non-essential users. Along with the action at 24-5 above it was hoped that this would allay some concerns. To be reviewed at the next meeting.

## **24-11 Future meeting dates**

03/05/2024

24/09/2024

21/01/2025

## Sustainability Sub Committee (SSC)



SSC23 – M3

**Minutes of Meeting**Minutes of the meeting held on Monday 2<sup>nd</sup> October 2023, 1430 – 1600 via Teams

★ Starred items are for information and are not discussed.

	Item		
23.3.1	<b>Present &amp; Apologies:</b>		
	<b>Present:</b> John Downey (JD)                      Matt Hope (MH) Nik Hunt (NH)                              Imogen Heaton (IH) Martin Channell (MC)                      Dan Brazill (DB) Helen Clarke (HC)                              Anna Ellis (AE) Mitul Shah (MS)                              Georgia Whelan (GW)	<b>Invited attendees:</b> Victoria Wright (VW) Laura Crawford (LC)  Vedika Bansal (VB) – Minute Taker	
	<b>Apologies:</b> Graham Howard (GH)                      Paul Conway (PC) Rob Wilby (RW)                              Judy Billington (JB) Rob Sparks (RS)                              Mark Davies (MD) Robyn Reeve (RR)                              Steve Powell (SP) Elliott Brown (EB)                              Dawn Matthews (DM) Kathryn North (KN)                              Simon Fawcett (SF) Gavin Bath (GB)                              Sarah Williamson (SW) Ruth Casey (RC)                              Karl Christison (KC)	<b>Not Present / Required</b> Kaz Setchell (KS) Greg Watts (GW)	
	<b>Note:</b> <ul style="list-style-type: none"> <li>• Sarah Williamson has overlapping meetings and will join us late</li> <li>• Welcome to new attendees:               <ul style="list-style-type: none"> <li>○ John Downey and Kathryn North – APVC's for CC &amp; NZ</li> <li>○ Mitul Shah – representing the Loughborough London Campus</li> <li>○ Georgia Whelan – EO Democracy &amp; Communities</li> <li>○ Gavin Bath – SAC Chair</li> </ul> </li> <li>• Welcome to Guest presenters Dr Victoria Wright and Dr Laura Crawford</li> </ul>		
	<b>John Downey chaired.</b>		
23.3.2	<b>Approval of minutes from the previous meeting</b> SSC23.M2 Approved		
23.3.3.	<b>Matters arising from the Minutes</b> SSC23.A3.P01 The action tracker was reviewed and updated as per the accompanying latest tracker.		

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

	<b>Items for Discussion:</b>
23.3.4	<p><b>To undertake a review of effectiveness of the Sustainability Sub Committee in line with this paper</b>  Paper SSC23.A3-P02 was used to conduct a review of effectiveness.  <b>Key point of note:</b>  Effectiveness – We don't have any Schools or Ops Managers present at the meeting and it is very E&amp;FM focused. Sustainability runs throughout the University and this needs to be reflected in membership.  IH has been able to write a paper to get LEAF adopted by the University and secure funding with the Sub Committee's support. The Sub Committee might be marginalised as it reports to HSE Cttee and not the Executive Board.  NH has been providing admin support as well as contributing largely to the meeting. More admin support is required.</p> <p>Governance – JD the governance of sustainability will be part of the review that we're currently undertaking.</p> <p>Attendees – very low attendance today reflects how important people feel the subcommittee is and how important and powerful the committee is, accepting that everyone is busy though.</p> <p>Sustainability runs through all 6 of the core plans and therefore to be effective these need to be reflected in the Governance, Agenda items and membership. The Sub Committee should be a Committee reporting to the UEB as well as Senate and Council not HSE.</p> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>NH</b> to discuss SSC membership review short term and long term with <b>JD</b>.</li> <li>• <b>NH and JD</b> to note effectiveness review and feed it into developing Sustainability Strategy and Governance Review.</li> <li>• <b>ALL</b> to consider meetings' purpose and effectiveness and contact JD and NH offline if they wish to speak with them.</li> </ul>
23.3.5	<p><b>To receive an update to the EMS Management Review, an update on the development of objectives and actions and the outcome of the external surveillance audit.</b>  Paper SSC23.A3-P03 was received from NH, summarising the paper which:</p> <ul style="list-style-type: none"> <li>• Updated the EMS Management review with the outcome of the external System Audit which occurred after the management review presented at the last meeting. This included the table of corrective actions and progress against these.</li> <li>• Responded to the action to create an action plan and allocate responsibilities for the Management Review Recommendations</li> <li>• Provided an update on the progress of the development and delivery of Objectives and Actions to achieve them, linking these to KPIs in response to an action from the last meeting.</li> <li>• Provided an update on the outcome of external Surveillance audit which occurred in August.</li> </ul> <p><b>Comments:</b>  System Audit – The outcome is stated in Appendix 1. Three of the eleven items are outstanding but making progress.</p> <p>Management Review Recommendations – 4/10 actions are completed as found in Appendix 2. This is tied in with Sustainability Governance Review which is due to</p>

	<p>be completed towards the end of January so some of these can't be completed until February.</p> <p>External Surveillance Audit – We have asked for a new Auditor as the current one did not find anything and is not adding value to the University.</p> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>NH</b> to progress work on the objectives and actions to achieve these linking them to KPIs where appropriate.</li> </ul>
23.3.6	<p><b>To receive an update on sustainability actions and plans in Catering from the Executive Head Chef.</b></p> <p>A verbal update / presentation was received from DB</p> <p><b>Key point of note were:</b></p> <ul style="list-style-type: none"> <li>• Catering and Retail provide approximately 2 million transactions per year.</li> <li>• Nationally food accounts for 30% of the UK Carbon footprint.</li> <li>• The procurement of suppliers is done through the University Caterers Organisation (TUCO) with sustainability built into all their tenders.</li> <li>• We support academic initiatives and research and have a nutrition intern working with us.</li> <li>• Sunrise Eggs is one of our local suppliers which is nationally recognised and highly committed to its welfare initiatives.</li> <li>• Sandwiches, one of our biggest sellers, are sourced from Real Wrap which is carbon negative.</li> <li>• The oil used for cooking is provided in metal drums and excess waste is recycled and turned into biodiesel.</li> <li>• Purchasing is local where possible (butchers, vegetables, baker, dairy).</li> <li>• Fish is MSC certified</li> <li>• In terms of training, the University has signed up with Menus of Change (24 principles), and some of these are already embedded within the business.</li> <li>• Trying to tie principles in with SDGs</li> <li>• We use the segregated correct recycling solutions to recycle metal, paper, plastic etc. We are also exploring RAMCO Sustainable and Catering Services.</li> <li>• In collaboration with Harper Adams University, we have contributed to their research in excess waste in the food chain.</li> <li>• We encourage reusable coffee cups and provide a 25p discount for this. Currently, 300,000 disposable cups are sold, and these can only be recycled if separated.</li> <li>• We have recently redesigned coffee machine units at zero cost to the University.</li> <li>• Brakes is our main transport supplier. They are increasingly using electric vehicles and suppliers can come onto campus in one vehicle and drop off items at multiple locations.</li> <li>• We are moving from gas to induction stoves and large ovens are being replaced with electric ones.</li> <li>• We are communicating with students through digital platforms such as TV screens and QR code menus.</li> <li>• RAPS – Retail Action Plan for Sustainability</li> </ul> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>DB</b> to work with the Procurement team about carbon negative sandwich supplier and include results in Scope 3 work.</li> <li>• <b>DB/NH</b> to develop Sustainable Food Policy Document and link to KPIs.</li> </ul>

	<ul style="list-style-type: none"> <li>• <b>DB</b> to share meat consumption data across campus with JD.</li> <li>• <b>NH</b> to investigate till data for disposable cups and revisit recycling of cups across campus and investigate a further increase in financial penalty for disposable cups / provide education about carbon footprint on packaging with support from Retail and Catering.</li> </ul>
23.3.7	<p><b>To receive a verbal update on the progress on LEAF and the Sustainability Technician role.</b></p> <p>A verbal update was received from IH, supported by NH</p> <p><b>Key point of note were:</b></p> <ul style="list-style-type: none"> <li>• Three labs now have Bronze Accreditation. One lab working towards Silver.</li> <li>• There is a Technicians Sustainability Working Group.</li> <li>• One lab is working towards the Dry Lab Pilot Scheme - this is being linked into DIGI Labs as well as feeding into the Sustainability group.</li> <li>• The labs are investigating the reduction of single use plastics.</li> <li>• The Sustainability Technician role has been approved by Ops and HR is currently working on advertising the role which should be done in the next few weeks.</li> </ul> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>NH</b> to progress Secondment</li> <li>• <b>JD and NH</b> to discuss budgeting for labs to investigate a reduction of single use plastic through investment in alternatives and how this could be funded.</li> </ul>
23.3.8	<p><b>To receive a presentation on the development of ESD Academic Practice tools.</b></p> <p>A verbal update / presentation was received from guests Dr Victoria Wright and Dr Laura Crawford who work in Organisational Development on Academic Practice.</p> <p><b>Key point of note were:</b></p> <ul style="list-style-type: none"> <li>• The team is currently creating a Staff Development Workshop for people interested in embedding SDGs in module content.</li> <li>• We are communicating and working with Andrew Reaves at DMU who has done this before.</li> <li>• A SharePoint with resources and signposts to support staff will be going live in early October to compliment information provided by the Sustainability Team.</li> <li>• We are looking to develop a 2<sup>nd</sup> workshop to follow the introductory workshop.</li> <li>• A community of practice has been established and has met for the first time.</li> <li>• PGCert - Education for Sustainable Development Workshop is one of the mandatory workshops</li> </ul> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>VW and JD</b> to discuss access to funding support for ESD Change Makers.</li> <li>• <b>JD</b> to investigate the idea of have a VC's Award for Sustainability / ESD</li> </ul>
23.3.9	<p><b>To undertake a discussion on the action needed to provide a suitable opportunity to apply for an award</b></p> <p>A verbal discussion occurred led by the chair.</p> <p><b>Key point of note were:</b></p> <ul style="list-style-type: none"> <li>• Green Gown Awards will be held at the end of November for which we were unable to put in any nominations for this year.</li> <li>• Run by the EAUC, the Alliance for Sustainability Leadership in Education</li> </ul>

	<ul style="list-style-type: none"> <li>• Applications need to be for something good but also new / different and innovative – something ahead of the curve.</li> <li>• We need to develop a campaign or practice or identify something we are doing which is appropriate for a nomination.</li> </ul> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>ALL</b> to think about good practices, an innovative and different campaign that is appropriate for nomination.</li> <li>• <b>NH</b> to share previous nominations / categories with members. – Please see <a href="https://www.greengownawards.org/showcasing-our-2023-finalists">https://www.greengownawards.org/showcasing-our-2023-finalists</a> This link provides details of the 15 categories and the standard of the finalists submissions.</li> </ul>
23.3.10	<p><b>To receive a verbal update on the plans to develop the Sustainability Strategy &amp; Governance</b></p> <p>A verbal update was received from JD, supported by KN &amp; NH</p> <p><b>Key point of note were:</b></p> <ul style="list-style-type: none"> <li>• Currently in the process of looking at where we are, thinking about priorities, feasibility, and short and long- term achievements.</li> <li>• Workshop on the 23<sup>rd</sup> of October – This will look at staff’s input on what they want to see being done and their priorities. This will feed into the development of a new strategy and delivery plan with a suitable government structure. The first draft is due to be written by the end of January.</li> </ul> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>JD</b> to keep everyone updated about workshop feedback and new strategy and delivery plan.</li> <li>• <b>ALL</b> to let NH know if yet to be invited to the Strategy workshop.</li> <li>• <b>JD</b> to find specialist teams’ views on feedback from workshop on item feasibility.</li> </ul>
23.3.11	<p><b>To receive any items of other business.</b></p> <p>None</p>
23.3.12	<p><b>To AGREE the date of the next meeting</b></p> <p>The next meeting will be January 10<sup>th</sup> 2-4pm – outlook calendar invite has been circulated.</p>
23.3.13	<p><b>To receive any Starred items for Approval</b></p> <p>None</p>
23.3.14	<p><b>To receive any Starred items for Information</b></p> <p>Paper SSC23.A3-P04 was received from EB</p> <p>Paper SSC23.A3-P05 was received from NH</p>
23.3.15	<p><b>Deferred items for the next Agenda</b></p> <ul style="list-style-type: none"> <li>• Annual Sustainability Report / other reporting – RR</li> <li>• Biodiversity: next steps on Baseline biodiversity - RR</li> </ul>

SSC24 – M1

**Minutes of Meeting**

Minutes of the sixth meeting held on Wednesday 10<sup>th</sup> January 2024, 1400 – 1600 via Teams

★ Starred items are for information and are not discussed.

	Item	
24.1.1	<b>Present &amp; Apologies:</b>	
	<b>Present:</b> John Downey (JD)                      Paul Conway (PC) Nik Hunt (NH)                              Mark Davies (MD) Elliott Brown (EB)                        Imogen Heaton (IH) Kathryn North (KN)                        Rich Fenn-Griffin (RFG) Graham Howard (GH)                        Dan Brazill (DB) Rob Sparks (RS)                              Anna Ellis (AE) Martin Channell (MC)                        Rob Wilby (RW) Mitul Shah (MS) Sarah Williamson (SW)	<b>Invited attendees:</b> Rainer Fernandes (RF)  Vedika Bansal (VB) – Minute Taker
	<b>Apologies:</b> Helen Clarke (HC)                              Dawn Matthews (DM) Georgia Whelan (GW)                              Laura Crawford (LC) Victoria Wright (VW)                              Gavin Bath (GB) Ruth Casey (RC)                                  Karl Christison (KC) Judy Billington (JB)                                  Matt Hope (MH) Mike Hart (MH2)	<b>Not Present / Required</b> Kaz Setchell (KS) Greg Watts (GW)
	<b>Note:</b> <ul style="list-style-type: none"> <li>• Mark Davies may have to leave and then rejoin.</li> <li>• Welcome to new attendees / guest presenters:                             <ul style="list-style-type: none"> <li>○ Mitul Shah – representing the Loughborough London Campus</li> <li>○ Rainer Fernandes – Sustainability Technician Secondment</li> <li>○ Rich Fenn-Griffin – presenting on Biodiversity</li> </ul> </li> </ul>	
	<b>John Downey chaired.</b>	
24.1.2	<b>Approval of minutes from the previous meeting</b> SSC23.M3 Approved	
24.1.3.	<b>Matters arising from the Minutes</b> SSC24.A1.P01 The action tracker was reviewed and updated as per the accompanying latest tracker. SSC24.M1 Action Tracker	

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

24.1.4	<p><b>Items for Discussion:</b></p> <p><b>To receive and update on and discuss the development of the Sustainability Risk Register</b>  Paper SSC24.A1-P02 was presented by NH and discussed.</p> <p><b>Key points of note:</b></p> <ul style="list-style-type: none"> <li>• The development of a Climate Risk Register has been an outstanding audit action for a while. This is the first step to try and get sustainability adopted into the main University Risk Register.</li> <li>• This Register includes risks around compliance, risks to reputation through league tables and scope 1, 2 &amp; 3 emissions.</li> <li>• While there are numerous risk registers covering parts of this, there isn't a fit-for-purpose template that covers a broad spectrum of such issues across campus.</li> <li>• Will need to ensure that the Risk Register is in line with the new Sustainability Strategy and Governance structure.</li> <li>• Need to consider how multiple risks translate into a single risk at HSE level and the RAG rating that is given when reporting to Council. Should the priority risk be chosen and just that one risk reported on?</li> </ul> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>JD/KN</b> to work out how this can develop, fit in with the wider university and is fit-for-purpose.</li> <li>• <b>ALL</b> to check out of the 13 identified risks if anything is missing. One missing risk is a Carbon Action Plan.</li> <li>• <b>NH/EB</b> to add in 4 more columns for severity/likelihood of risk, ownership, RAG rating for progress made and information sources plus action required. Chase if CETG findings made its way to the University's Risk Register. Add in section for Campus Partners. Incorporate PWC Feedback. Link to Elite sport delivery. Meet with GH</li> <li>• <b>NH/EB</b> to then recirculate this with the committee.</li> <li>• <b>EB</b> to relay back feedback from meeting with Neil Budworth to <b>JD/KN</b>.</li> </ul>
24.1.5	<p><b>To receive a presentation on activity to maintain and develop Biodiversity and discuss the risks.</b>  A Presentation was given by RFG</p> <p><b>Key points of note:</b></p> <ul style="list-style-type: none"> <li>• Our vision is to create an inspiring, sustainable, and biodiverse green environment for people to thrive in.</li> <li>• Our wellbeing activities include Conservation Volunteering, Christmas in the Wood, Blue Bell Walks and Dawn Chorus.</li> <li>• We collaborate with many teams such as the chaplaincy, wellbeing team and different departments across campus.</li> <li>• To drive down carbon emissions, we will need to eliminate seasonal bedding, reduce transportation, and reduce watering needs.</li> <li>• All machinery that is bought is battery driven.</li> <li>• Currently Investigating reduction in the amount of herbicide across campus.</li> <li>• Everything on site is compostable which is a part of our Green Waste Management.</li> <li>• The Biodiversity Action Plan includes creating more complex habitats across campus, more pollinators and planting and growing grass in the hotter months for invertebrate to feed on.</li> <li>• Our plant supplier has a Plant Healthy certificate which means there is a low possibility of bringing in diseases into the country.</li> </ul>



	<ul style="list-style-type: none"> <li>• We have been surveyed by the Leicestershire Fungi Group and Leicestershire Bat Conservation Group.</li> <li>• We are signed up with Nature Positive Universities for which we have not done anything as of now. We will need to coordinate this with other strands.</li> <li>• A risk with the Woodland Management Plan is that we are dependant on volunteers and without them biodiversity in the Woodlands will fall.</li> <li>• For Wellness sessions, we are dependent on 1 individual showing up to lead sessions. Not enough resources are allocated to biodiversity.</li> <li>• There is a reputational risk as we have not produced an annual report/baseline survey on how to curb biodiversity loss. We should plan to curb this by 2030 and then go for biodiversity gain.</li> <li>• To stop invertebrate decline, which has seen the highest recorded dropping in the last 5 years, we need to focus on growing long grass, reducing light pollution, and increasing flowering sources.</li> </ul> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>NH</b> to progress meeting to determine approach to pull all this together.</li> <li>• <b>RFG &amp; NH</b> to explore biodiversity communications and signage plans for big events such as open days and graduation.</li> <li>• <b>GH</b> to meet with executive at Charnwood Borough Council to discuss Biodiversity Actions and disincentive to act as we can't later offset.</li> </ul>
24.1.6	<p><b>To receive an update on sustainability reporting and league tables, our standings and the work required.</b></p> <p>Paper SSC24.A1-P03 was presented by EB and discussed</p> <p><b>Key points of note:</b></p> <ul style="list-style-type: none"> <li>• The University has ranked 64<sup>th</sup> globally, we have gone up from around 200 on the QS Sustainability Ranking. This is not due to a lot of progress being made but because we now have access to pre-existing data which we didn't have previously.</li> <li>• We rose by 8 spaces and now rank 68<sup>th</sup> on People and Planet. This ranking is dependent on publicly available data. While we have limited influence on this, we can make some quick wins through our website.</li> <li>• We rank 15<sup>th</sup> globally and 10<sup>th</sup> nationally on THE Impact Rankings.</li> <li>• While we didn't score on the Sustainability Leadership Scorecard last year, this is on our radar, and we are reviewing opportunities to score on this. Previously, we had not scored well in teaching, partnerships, leadership, and governance.</li> <li>• We will be meeting with R&amp;I later this month to understand different league tables, evidence collection and how we can improve our rankings to improve our accountability, transparency, and sustainability.</li> </ul> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>EB</b> to chair meeting this month and to develop an outline for the action plan to share with SSC at the next meeting</li> <li>• <b>GH</b> to investigate expanding size/increasing resource for the sustainability team.</li> </ul>
24.1.7	<p><b>To receive a verbal update on the progress in developing the Sustainability Strategy and Governance.</b></p> <p>A verbal update was provided by JD and KN</p> <p><b>Key points of note:</b></p> <ul style="list-style-type: none"> <li>• Currently engaged in consultations with colleagues to develop a first draft due towards the end of January. This will then be presented to the executive board at a ULG meeting where sustainability will be a major agenda item.</li> </ul>

	<ul style="list-style-type: none"> <li>• The new Sustainability Strategy will be soft launched at General Assembly in March.</li> <li>• There are plans to communicate and substantiate the strategy towards the end of April/in May. This will be through videos and the website. The VC has agreed to be a figure head for the strategy.</li> </ul> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>JD/KN</b> to communicate feedback from UEB with the committee.</li> </ul>
24.1.8	<p><b>To receive an update on the approach for addressing training and engagement.</b></p> <p>A verbal update was provided by EB and NH</p> <p><b>Key points of note:</b></p> <ul style="list-style-type: none"> <li>• Currently putting together, a coherent plan to further develop training and engagement.</li> <li>• Discussed sustainability practices/education with colleagues across the university to understand what is being communicated.</li> </ul> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>EB/NH</b> to pull notes/actions from meeting with colleagues to identify gaps and put together a long and short-term training plan.</li> </ul>
24.1.9	<p><b>To receive a verbal update and presentation on activity on Sustainability for Loughborough London.</b></p> <p>A Presentation was given by MS</p> <p><b>Key points of note:</b></p> <ul style="list-style-type: none"> <li>• Energy consumption levels have fallen in the past couple of years since covid. This is because of fewer events being held, less students and lower occupancy of buildings.</li> <li>• Energy saving practices are embedded into all that we do. The office plan has changed to one with an open area plan with new meeting pods being installed. Old fluorescent lighting in the café has been removed and sensors/lighting control installed.</li> <li>• Any new appliances that are bought are energy efficient. For any refurbishments in toilets/showers, energy efficient models are being used.</li> <li>• It is not possible to implement the single cup surcharge for disposable cups. To encourage reusable cups, we will be working with café operators to sell LU cups through the café/online stores. We will also be selling Loughborough Gold Honey through the online store.</li> <li>• The reception previously had a 12-screen wall which has now been replaced with 1 large screen.</li> <li>• An LED lighting upgrade has been proposed. This is a little complicated as we are tenants in the building. Alternatively, daylight harvesting options will be investigated.</li> <li>• Campus printers switch off when not in use. They use 100% recyclable paper.</li> <li>• No pattern has been found in waste recycling trends through the months.</li> <li>• Bin signage is being improved and installed near bins. We are also reducing number of bins dotted around.</li> <li>• The London campus is the only one to have a full day EMS audit for ISO14001, 2 out of 3 years.</li> <li>• We have Warp It coordinators to redistribute furniture around campus.</li> <li>• We are adopting a carbon action planner and developing some actions from today to be implemented.</li> </ul>

	<p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>MS</b> to investigate upgrading the BMS system which is quite old and not supported.</li> <li>• <b>MS</b> to investigate printing statistics for students/staff and how this can be reduced.</li> <li>• <b>MS</b> to look into issues of contaminated waste.</li> </ul>
24.1.10	<p><b>To receive and discuss proposed wording for a VC's Award for Sustainability.</b>  Paper SSC24.A1-P04 was presented by NH and discussed</p> <p><b>Key points of note:</b></p> <ul style="list-style-type: none"> <li>• Category around sustainability that gives all staff across teaching, research, impact and campus operations, an opportunity to be awarded.</li> <li>• Proposed wording includes Sustainability Champions, Embedding Sustainability, SDG Award and Net Zero Contribution.</li> <li>• It would be good if staff could be made aware of this during their PDR sessions etc.</li> </ul> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>JD</b> to have a look at proposed wording and make some suggestions.</li> </ul>
24.1.11	<p><b>To receive any items of other business.</b></p> <ul style="list-style-type: none"> <li>• Team Update – There is some restructuring to the team as EB is now the acting Sustainability Manager. NH will be transitioning to part time hours once recruitment for a Sustainability Officer is complete.</li> <li>• Interns (Macro &amp; Micro) – We have received funding for 2 interns joining this term. They will be working on SDG mapping work/events planning and air quality monitoring/legislation, respectively.</li> <li>• LEAF – Secondment and Awards – RF will be supporting the team. We have been awarded for making labs more sustainable at the Technician Awards.</li> </ul>
24.1.12	<p><b>To AGREE the date of the next meeting</b>  The next meeting will be May – tentative date and time is 22<sup>nd</sup> May 1.30-3.30  Meeting to be scheduled for the end of May.</p>
24.1.13	<p><b>To receive any Starred items for Approval</b>  None</p>
24.1.14	<p><b>To receive any Starred items for Information</b>  Paper SSC24.A1-P05 was received from EB  The scheduled presentation from the Students Union with voiceover was received from GWh and had been circulated with the Agenda and Papers.</p>
24.1.15	<p><b>Deferred items for the next Agenda</b>  None</p>

## Sustainability Sub Committee (SSC)



### SSC24.M1.Action Tracker

#### SSC Action Tracker / Matters Arising

Minute Ref	Matter	Action	Status	Assignee	Update
23.1.8	To RECEIVE the Furniture and Equipment Sharing and Reuse Update	<ul style="list-style-type: none"> <li>to follow up on Kit Catalogue with Julie Turner and then PC</li> </ul> <p><b>SSC23.2.3 – Kit catalogue has been approved for relaunch / re introduction. IT to resource updates needed.</b></p> <p><b>SSC24.1.3 – NH to update JD after JT has met with RT</b></p> <p><b>PC raised some concerns – NH to pick up on these with JT.</b></p> <p><b>GH to raise with Snr Management need for Inventory (asset) Management system.</b></p> <p><b>SSC24.1.3 Investigation needed on storage requirements and inventory system.</b></p>	Open	NH	Update May '23: Verbal update in meeting Update Oct '23: Pending IT Development to address issues <b>Update Jan '24: No Progress by ITS – currently awaiting further response from JT. OPEN</b>
			Open	NH	
			Open	NH	Pending above action
			Open	GH	Update Oct '23: Raised in SASC as part of a plan to deliver a domestic services stores solution for the campus. <b>Update Jan '24: Support exists but no dedicated space. Seeking next steps. OPEN</b>
			Open	TBD	

23.1.12	To RECEIVE a proposal to consider developing an Event Sustainability Management System	Agreement in principle obtained but has asked for resource requirements and understanding of Imago, SDC, LSU implications <b>SSC23.2.3 NH to progress</b> <b>SSC24.1.3 EB/NH to progress</b>	Open	NH	Update Oct '23: In work plan but no further progress. <b>Update Jan '24: EB is progressing as special project meeting planned for Jan and awaiting Gap Analysis from BSI. OPEN</b>
23.2.8	To receive an update on various aspects relating to ESD, Carbon Awareness / Literacy, Personal Best, Sustainability Essentials.	<b>NH</b> to consider / discuss App idea with key stakeholders	Open	NH	Update Oct '23: No progress <b>Update Jan '24: Progressing as Design Sprint – verbal update. OPEN</b>
<b>NEW ACTIONS</b>					
23.3.5	To receive an update to the EMS Management Review, an update on the development of objectives and actions and the outcome of the external surveillance audit	<b>NH</b> to progress work on the objectives and actions to achieve these linking them to KPIs where appropriate	Open	NH	<b>Update Jan '24: Objectives and Actions remain on hold whilst Strategic Objectives and Actions are finalised. ONGOING</b>
23.3.6	To receive an update on sustainability actions and plans in Catering from the Executive Head Chef	<ul style="list-style-type: none"> <li>• <b>DB</b> to work with the Procurement team about carbon negative sandwich supplier and include results in Scope 3 work.</li> <li>• <b>DB/NH</b> to develop Sustainable Food Policy Document and link to KPIs. <b>SSC24.1.3 DB/NH to progress</b></li> <li>• <b>DB</b> to share meat consumption data across campus with JD.</li> <li>• <b>NH</b> to investigate till data for disposable cups and revisit recycling of cups across campus and investigate a further increase in financial penalty for disposable cups / provide education about carbon footprint on packaging with support from Retail and Catering.</li> </ul>	Open	DB	<b>Update Jan '24: Verbal update in meeting – awaiting on further info from supplier. OPEN</b>
			Open	DB / NH	<b>Update Jan '24: Verbal update in meeting – DB and NH to meet. OPEN</b>
			Open	DB	<b>Update Jan '24: Verbal update in meeting – complex due to how purchased and who from. OPEN</b>
			Open	NH	<b>Update Jan '24: Data reviewed and proposals for additional steps put forward to RC&amp;DS, awaiting response (chased – requesting meeting in Jan). OPEN</b>
23.3.7	To receive a verbal update on the progress on LEAF and the Sustainability Technician role.	• <b>NH</b> to progress Secondment	Open	NH	<b>Update Jan '24: Progressed and Appointed Rainer Fernandes. CLOSED</b>

		<ul style="list-style-type: none"> <li>• <b>JD and NH</b> to discuss budgeting for labs to investigate a reduction of single use plastic through investment in alternatives and how this could be funded</li> </ul>	Open	JD /NH	<b>Update Jan '24: No Progress, needs to be discussed as part of overall budget review alongside strategy. ONGOING.</b>
23.3.8	To receive a presentation on the development of ESD Academic Practice tools.	<ul style="list-style-type: none"> <li>• <b>VW and JD</b> to discuss access to funding support for ESD Change Makers.</li> <li>• <b>JD</b> to investigate the idea of have a VC's Award for Sustainability / ESD</li> </ul>	Open Open	VW / JD JD	<b>Update Jan '24: Meetings have occurred and funding will be sort early in 2024. ONGOING</b> <b>Update Jan '24: Approved. On agenda. CLOSED.</b>
23.3.9	To undertake a discussion on the action needed to provide a suitable opportunity to apply for an award	<ul style="list-style-type: none"> <li>• <b>ALL</b> to think about good practices, an innovative and different campaign that is appropriate for nomination.</li> <li>• <b>NH</b> to share previous nominations / categories with members</li> </ul>	Open Closed	ALL NH	<b>Update Jan '24: Looking at C-DICE and STEER. Anything else? ONGOING – meeting to be arranged with KN</b> Link Shared in the Minutes. CLOSED
<b>NEW ACTIONS</b>					
24.1.4	To receive and update on and discuss the development of the Sustainability Risk Register	<ul style="list-style-type: none"> <li>• <b>JD/KN</b> to work out how this can develop, fit in with the wider university and is fit-for-purpose.</li> <li>• <b>ALL</b> to check out of the 13 identified risks if anything is missing. One missing risk is a Carbon Action Plan</li> <li>• <b>NH/EB</b> to add in 4 more columns for severity/likelihood of risk, ownership, RAG rating for progress made and information sources plus actin required. Chase if CETG findings made its way to the University's Risk Register. Add in section for Campus Partners. Incorporate PWC Feedback. Link to Elite sport delivery. Meet with GH</li> <li>• <b>NH/EB</b> to then recirculate this with the committee</li> </ul>	Open Open Open Open	JD/KN All NH/EB NH/EB	

		<ul style="list-style-type: none"> <li>• <b>EB</b> to relay back feedback from meeting with Neil Budworth to <b>JD/KN</b></li> </ul>	Open	EB	
24.1.5	To receive a presentation on activity to maintain and develop Biodiversity and discuss the risks	<ul style="list-style-type: none"> <li>• <b>NH</b> to progress meeting to determine approach to pull all this together.</li> <li>• <b>RFG &amp; NH</b> to explore biodiversity communications and signage plans for big events such as open days and graduation</li> <li>• <b>GH</b> to meet with executive at Charnwood Borough Council to discuss Biodiversity Actions and disincentive to act as we can't later offset.</li> </ul>	Open Open Open	NH RFG/NH GH	
24.1.6	To receive an update on sustainability reporting and league tables, our standings and the work required.	<ul style="list-style-type: none"> <li>• <b>EB</b> to chair meeting this month and to develop an outline for the action plan to share with SSC at the next meeting</li> <li>• <b>GH</b> to investigate expanding size/increasing resource for the sustainability team.</li> </ul>	Open Open	EB GH	
24.1.7	To receive a verbal update on the progress in developing the Sustainability Strategy and Governance	<ul style="list-style-type: none"> <li>• <b>JD/KN</b> to communicate feedback from UEB with the committee</li> </ul>	Open	JD/KN	
24.1.8	To receive an update on the approach for addressing training and engagement.	<ul style="list-style-type: none"> <li>• <b>EB/NH</b> to pull notes/actions from meeting with colleagues to identify gaps and put together a long and short-term training plan</li> </ul>	Open	EB/NH	
24.1.9	To receive a verbal update and presentation on activity on Sustainability for Loughborough London	<ul style="list-style-type: none"> <li>• <b>MS</b> to investigate upgrading the BMS system which is quite old and not supported.</li> <li>• <b>MS</b> to investigate printing statistics for students/staff and how this can be reduced.</li> <li>• <b>MS</b> to look into issues of contaminated waste</li> </ul>	Open Open Open	MS MS MS	

24.1.10	To receive and discuss proposed wording for a VC's Award for Sustainability	<ul style="list-style-type: none"> <li>• <b>JD</b> to have a look at proposed wording and make some suggestions</li> </ul>	Open	JD	
		<ul style="list-style-type: none"> <li>•</li> </ul>			

**CLOSED ACTIONS:**

23.3.4	To undertake a review of effectiveness of the Sustainability Sub Committee	<ul style="list-style-type: none"> <li>• <b>NH</b> to discuss SSC membership review short term and long term with <b>JD</b>.</li> <li>• <b>NH and JD</b> to note effectiveness review and feed it into developing Sustainability Strategy and Governance Review</li> <li>• <b>ALL</b> to consider meetings' purpose and effectiveness and contact JD and NH offline if they wish to speak with them.</li> </ul>	Open	NH	<b>Update Jan '24: Pending outcome of Governance Review Approval – Verbal update on Agenda. CLOSED</b> <b>Update Jan '24: Will be considered as ToR for revised governance developed CLOSED</b>  <b>Update Jan '24: Nothing further received CLOSED</b>
			Open	NH / JD	
			Open	ALL	
23.3.10	To receive a verbal update on the plans to develop the Sustainability Strategy & Governance	<ul style="list-style-type: none"> <li>• <b>JD</b> to keep everyone updated about workshop feedback and new strategy and delivery plan.</li> <li>• <b>ALL</b> to let NH know if yet to be invited to the Strategy workshop.</li> <li>• <b>JD</b> to find specialist teams' views on feedback from workshop on item feasibility.</li> </ul>	Open	JD	<b>Update Jan '24: On agenda. CLOSED</b>  <b>Update Jan '24: Time now elapsed. CLOSED</b> <b>Update Jan '24: On Agenda. CLOSED</b>
			Open	ALL	
			Open	JD	
23.2.4	To receive updates from Dan Parsons on the progress of current Governance reviews	<ul style="list-style-type: none"> <li>• <b>GH</b> to share PwC report with SSC and the new senior PVC Support roles when received so that we may review and comment</li> <li>• <b>GH</b> to seek a progress report and next steps from Dan Parsons.</li> <li>• <b>GH</b> to confirm who the new senior PVC Support role postholders are</li> </ul>	Closed	GH	<b>Update Oct '23: Shared with these papers. CLOSED</b>  <b>Update Oct '23: On Agenda CLOSED</b> <b>Update Oct '23: Shared CLOSED</b>
			Closed	GH	
			Closed	GH	
23.2.5	To receive an update from the SDC and Elliott Brown on progress reviewing the UN Sports for Climate Change Pledge	<ul style="list-style-type: none"> <li>• <b>EB</b> to investigate the idea of joining the British Association for Sustainable Sport (BASIS)</li> </ul>	Closed	EB	<b>Update Jan '24: On agenda as Paper for Info. CLOSED</b>



		<a href="https://basis.org.uk/">https://basis.org.uk/</a> and report back. <ul style="list-style-type: none"> <li>• <b>EB</b> to continue progression of this with SDC and an appropriate working group meeting in June</li> <li>• <b>EB</b> to seek clarification on the requirements to re-sign up</li> </ul>	Closed	EB	<b>Update Oct '23: See Note 1. Below table. CLOSED</b>
			Closed	EB	<b>Update Oct '23: See Note 2. Below table. CLOSED</b>
23.2.6	To receive and approve the EMS Annual Management Review	<ul style="list-style-type: none"> <li>• <b>NH</b> to follow up on actions proposed and approved, creating an action table with target dates and owner</li> <li>• <b>NH</b> to develop KPI's as part of the objectives review</li> </ul>	Closed	NH	<b>Update Oct '23: On Agenda CLOSED</b>
			Closed	NH	<b>Update Oct '23: On Agenda CLOSED</b>
23.2.7	To receive an update on progress relating to our commitments as part of the SDG Accord and reporting	<ul style="list-style-type: none"> <li>• <b>GH</b> to speak to PVC's for R&amp;I and ESE re clear and improved commitment to the SDG's (but also ESD as referenced in the next Agenda Item).</li> </ul>	Closed	GH	<b>Update Oct '23: The APVC's will address this as part of the development of the Sustainability Strategy and Governance. CLOSED</b>
23.2.8	To receive an update on various aspects relating to ESD, Sustainability Essentials, Carbon Awareness / Literacy, Personal Best	<ul style="list-style-type: none"> <li>• <b>GH</b> to speak to PVC's for R&amp;I and ESE re clear and improved commitment</li> <li>• <b>NH</b> to meet with Careers re Personal Best as planned</li> <li>• <b>NH</b> to meet with SW re review of progress and clear way forward</li> </ul>	Closed	GH	<b>Update Oct '23: As per update for 23.2.7 CLOSED</b>
			Closed	NH	<b>Update Oct '23: On Agenda CLOSED</b>
					Update Oct '23: With RR - currently not able to report on progress. <b>Update Jan '24: On Agenda CLOSED</b>
23.2.9	To receive an update on sustainability actions and plans in Catering from the Executive Head Chef	<b>DB</b> to prepare for the next meeting	Closed	DB	<b>Update Oct '23: On Agenda CLOSED</b>
23.2.10	To receive an update on sustainability actions and plans from the Print, Post & Logistic Services	<b>HC &amp; NH</b> to catch up on potential for news story and linking this with the CAP tool.	Closed	HC & NH	<b>Update Oct '23: Opportunities discussed and progressed. CLOSED</b>
23.2.11	To receive an update on the results of the recent Sustainability Week	<b>ALL</b> to review this paper.	Closed	ALL	<b>Update Oct '23: no further action CLOSED</b>
23.2.12	To receive a proposal to run Repair Workshops from the Sustainability Assistant	<b>RB &amp; NH</b> to progress delivery of this with a key requirement to address the electrical concern	Closed	RB & NH	<b>Update Oct '23: On Agenda CLOSED</b>

23.1.3	Matters arising from the Minutes	to mention CBC's Draft Climate Change Strategy 2023-30 to the consultants for consideration as part of the governance approach review	Closed	NH	Actioned immediately after the meeting
23.1.4a	To RECEIVE the Sustainability Team Updates – Benchmarking, league tables, commitments. Relates back to 22.1.7 and 22.2.9	To work with PVC (R&I) on working group to look at benchmarking, league tables, commitments  <b>SSC23.2.3 RR to follow up on progress.</b>	Closed	RR	History: Key areas are SDG Accord Index Return, Sustainable Leadership Scorecard, People & Planet, THE Impact Rankings and Green Metric. Update May '23: The Honours Committee have been tasked with creating a working group. Update Oct '23: Currently not able to report on progress <b>Update Jan '24: On Agenda CLOSED</b>
23.1.4b	To RECEIVE the Sustainability Team Updates – Sustainability Strategy Also relates to 22.2.5	To talk to DVC, COO and PVC (R&I) about developing a strategy to align with the University Strategy, providing direction until the enabling plans have been developed, but possibly providing guidance for those plans.	Closed	GH	Update May '23: The revised strategy updated by Robyn was offered to University H&S Committee. There was a request for some amendments to be made but the main issue was around waiting for PVC (R&I) to develop proposals for the future governance of University ESG. <b>CLOSED</b>
23.1.5	To RECEIVE an Update on the Civic University Agreement – Environment Theme	to follow up with CUA on CBC's Draft Climate Change Strategy 2023-30	Closed	NH	Actioned immediately after the meeting
23.1.6	To RECEIVE the Imago Sustainability Update	To follow up on opportunities suggested: <ul style="list-style-type: none"> <li>• Reducing water consumption</li> <li>• Better waste segregation</li> <li>• Mystery customer</li> </ul> <b>SSC23.2.3 – SP not present so update deferred to next meeting.</b>	Closed	SP	Update May '23: SP Not Present  <b>Update Oct '23: - See Note 3. Below table. Agreed as CLOSED</b>
23.1.7	To RECEIVE an update on Sustainable Labs using LEAF	<ul style="list-style-type: none"> <li>• to raise any requirements with GH or NH <b>SSC23.2.3 IH update that LEAF going well with 18 labs signed up. NH and IH raised that a lab technician secondment would help address</b></li> </ul>	Closed	IH & EB2	<b>Update Oct '23: On Agenda CLOSED</b>

		<b>sustainability in labs / workshops. NH to look into area usage to assess scale of usage. IH to talk to Julie Turner re overall requirements so case can be put to FM in terms of resource requirement. IH and NH to progress.</b>			
23.1.8	To RECEIVE the Furniture and Equipment Sharing and Reuse Update	<ul style="list-style-type: none"> <li>to follow up on Digilab opportunity</li> </ul> <b>SSC23.2.3 NH to progress</b>	Closed	NH	Update May '23: No progress made Update Oct '23: Awaiting responses <b>Update Jan '24: No opportunities identified to date. Ongoing but CLOSED.</b>
23.1.10	To RECEIVE an update on the UN Sports For Climate Change Pledge	to progress with MD and present back at the next meeting	Closed	EB	<b>Covered on Agenda Item 5 – CLOSE</b>
23.1.11	To RECEIVE an update from the recent meeting and presentation on ESD	to follow up with Prof Thomson	Closed	NH	<b>Covered on Agenda Item 8 – CLOSE</b>
22.1.8	To DISCUSS the proposed addition of climate risk to the strategic risk register and AGREE a course of action.	To bring together relevant persons to draft an Environmental Sustainability Risk Register for the next meeting along with a means of establishing and measuring impact metrics. <b>SSC23.2.3 RR to bring to next meeting.</b>	Closed	RS / RW	Update Jan '23: Covered in Sustainability Team Updates Update May '23: Work on this is ongoing with first draft expected June '23 Update Oct '23: Currently not able to report on progress <b>Update Jan '24: On Agenda CLOSED</b>

Older Actions (From 2022 meetings) available on historical Minutes (or on request).

## 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
SAF22-M2	29.4	<i>Stress and Mental Health Provision:</i> Establish whether it is possible to obtain better sickness absence data on mental health	Director of HSW	<b>Sept 23 Update:</b> HR colleagues have been consulting broadly across the University on the provision of sickness absence data. Ongoing. <b>Jan 24 Update:</b> OH and HR have been working with specific schools to highlight mental health trends with regards to management referrals. There are now quarterly HR and OH meetings planned to discuss sickness absence trends/ school level data/ the impact of the EAP – MI information being shared with the whole HR team.
SAF22-M3	51.2	Include revised version of the Sustainability Leadership Scorecard in the revised Sustainability Annual Report	Sustainability Manager	The Sustainability Leadership Scorecard continuing to be used. It is anticipated that the audit will be completed by July 2023. <b>May 2023 Meeting:</b> Not yet done. Should be completed but will be completed by October. <b>Oct 2023 Meeting:</b> Not clear who progressing in the absence of the Sustainability Manager. Secretary to seek clarification from the Director of Estates & FM.
SAF23-M1	15.2	GM/Biosafety Committee action plan to be considered at October 2023 HSE Committee meeting	Strategic Scientific Technical Lead	Was to be considered at February 2024 meeting. Postponed until May 2024 meeting due to SSTL current workload.
SAF23-M2	25.2	<u>HSE Update:</u> SSH To review risk register during 2023/24 academic year. Seek advice from Deputy HSW Manager.	SSH Head of Operations	SSH Head of Operations has confirmed that the risk register review has been completed by February 2024 meeting as requested.

Meeting	Minute	Description	Action	Status
SAF23-M2	28.3	<u>Director of HSW Update</u> Discuss current format of sickness absence record form with HR Senior Management Team	Head of HR Partnering	<p>Working group established with aim to improve the reporting of sickness absence at School/Department and University level.</p> <p>Improvements made to in-use Business Objects report to enable more meaningful HR and management interventions and use of data. Will be trialled by HR Services team and HR Business Partners and developed further to find better ways to visualise and present data. Includes how best to report on short vs long term absences, linked absences and how to best align with HR KPIs.</p> <p><b>Oct 23 Meeting:</b> Ongoing and moving forward. Taking into consideration stakeholder views. More information will be available by Feb 24 meeting.</p>
SAF23-M2	30.2	<u>Snow and Ice Clearance Policy</u> Propose potential EDI issues to be captured in the document	Director of Estates & FM	<p><b>Oct 23 Meeting:</b> H&amp;S Service has consulted various stakeholders. Several comments received. Forwarded to Estates &amp; FM for consideration in development of Show and Ice Clearance guidance document. Estates &amp; FM to finalise the guidance document in the absence of the Sustainability Manager</p>
SAF23-M2	30.3 & 30.4	<u>Snow and Ice Clearance Policy</u> Amend document to reflect HSE view that it is a guidance document clarifying requirements of Estates and FM staff and providing information for campus users. Revised document to be a starred 'for information' item on October agenda. Coversheet to confirm EDI requirements taken into consideration	Sustainability Manager	<p><b>Oct 23 Meeting</b> Estates &amp; FM to progress in the absence of the Sustainability Manager.</p>
SAF23-M3	38.4	<u>Arising from Director of HSW Update</u> LB Dean not receiving sickness absence information. Raise with School's HR Business Partner	LB Dean	<p>Feb 24 Update Dean is still not receiving this information. Has queried with the HR Business Partner</p>

Meeting	Minute	Description	Action	Status
SAF23-M3	39.4	<u>LU London Update</u> Acknowledge in the LU London Risk Register that the limited security coverage outside office hours poses a potential risk to occupants	LU London Operations Director	Operations Director has confirmed that this is in progress.
SAF23-M3	39.5	<u>LU London Update</u> Exploring the possibility of increasing the number of security staff on duty outside office hours. Inform HSE Committee if make changes.	LU London Senior Management Team	Data has been sought from Estates and FM with a view to a proposal being submitted to the February Operations Committee meeting
SAF23-M3	40.3	<u>LB Update</u> Follow up referral to SDC of incident of cricket ball hitting window in Sir Richard Morris Building to determine whether incidents of this kind could be avoided in the future.	Director of HSW	Specialist advice has been sought on the probability of ball trajectories. Extremely high fencing would be required around both cricket pitches to ensure that no ball exited the playing area. The information is being considered.
SAF23-M3	40.4	<u>LB Update</u> Clarify legal costs position in hypothetical scenario where member of staff brings civil claim against a senior manager as well as the University.	Director of Finance	Director of Finance & Director of HSW have considered this query. If an individual is named in a civil claim and they have been acting in the course of their employment then their costs would be covered. If they are being sued on the basis of something that would not be reasonably expected as part of their employment or had acted recklessly deliberately contravening University policies then their costs may not be covered. Therefore, if managers are acting in a reasonable way then they should not be concerned about this issue.
SAF23-M3	41.3	<u>University Event Safety Update</u> Ensure that the findings from the water-based hockey pitch fall have been followed up.	Director of HSW	Increased facilities inspections are in place, the filming platform has been removed and the Archibus architecture has been addressed. <b>Action completed</b>
SAF23-M3	41	<u>University Event Safety Update</u> LSU Review Group to be asked to define the roles of the University and LSU in relation to hall activities and also to include health and safety within its terms of reference	COO	Action has been superseded. The Review is taking a different approach. This now needs picking up as BAU by Student Services with the Wardens.

Meeting	Minute	Description	Action	Status
SAF23-M3	42.4	<u>HTA Update</u> Provide update for February meeting to provide HSE with assurance of School's compliance	SSEHS Dean & Head of Operations	
SAF23-M3	43	<u>Constitution, Terms of Reference &amp; Membership</u> Identify a potential new lay member and reflect upon ways to improve BAME membership of HSE	Chair, Director of HSW	<b>Action Completed</b>
SAF23-M3	45.3	<u>Statutory Compliance Key Performance Indicators</u> Raise with University Compliance Officer need to update AACME designated flushing group	Graham Moody	<b>Action Completed</b>
SAF23-M3	47.2	<u>Management of Electronic Transport Devices on Campus</u> Make University's tenants aware of the University's position	H&S Service and Campus Security	Notices have been installed around campus and information has been placed on the University website and included in newsletters.
SAF23-M3	47.4	<u>Management of Electronic Transport Devices on Campus</u> Communicate risks associated with non-complaint e-bikes	H&S Service	Safety alert issued
SAF23-M3	49.1	<u>Future Business</u> Note that updates from School of Science and Marketing & Advancement and from the risk area of wellbeing to be considered at May meeting.	Secretary	<b>Feb 24:</b> Future business paper proposes that HSE Committee should receive the following updates at its May meeting: School of Science update WMEME update Risk area: Wellbeing
SAF23-M3	49.2	<u>Future Business</u> Note that business for following two meetings to be agreed at each meeting.	Secretary	Noted for future meetings. <b>Completed</b>

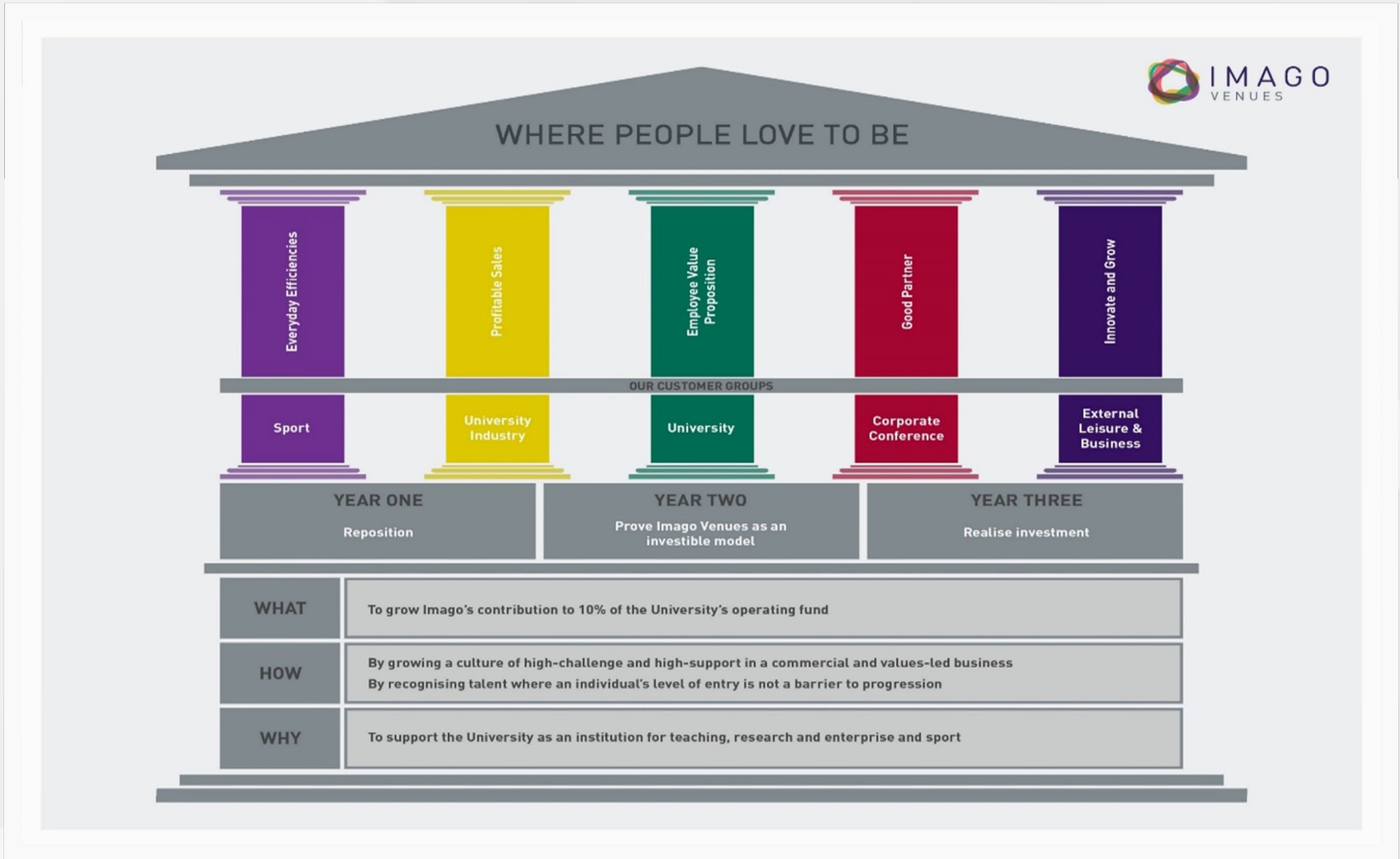


# HSE Committee School and Professional Service Progress Update

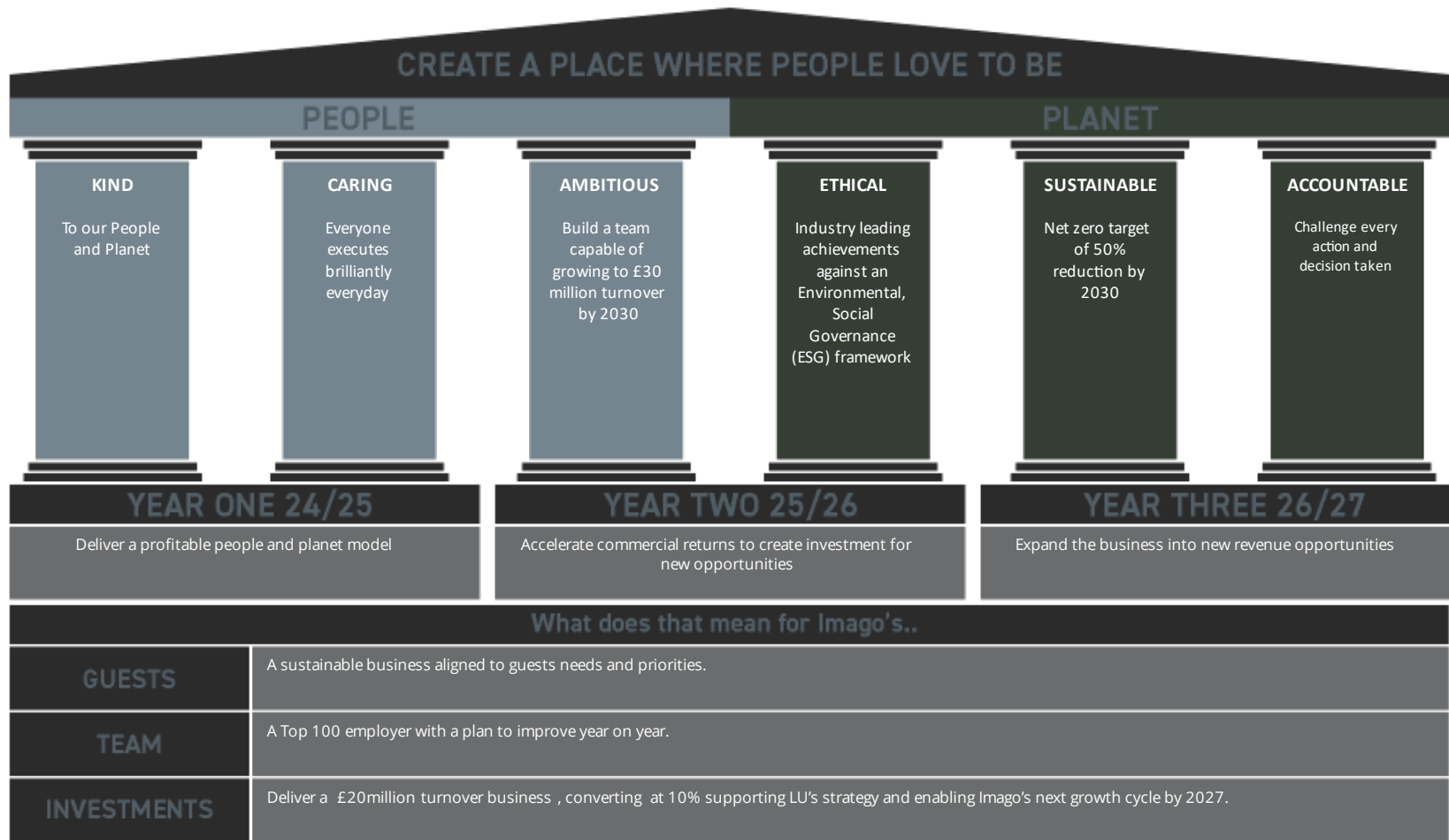
# Introduction to Imago Venues

- Imago is subsidiary company of Loughborough University, primarily providing hospitality, conferencing, and accommodation. It operates three hotels with differing offers and a conference centre. The hotels vary in size, Burleigh Court has one hundred and eighty-five bedrooms and twenty-two meeting / conference rooms, it is a four-star property. The Link operates ninety-four bedrooms four meeting rooms, it is a three-star property. The Elite Athlete Centre which is primarily focused to sporting groups, it has forty-four bedrooms and three meeting rooms. Finally, Holywell Park is a conference centre and training facility it has three conference spaces and eleven training rooms.
- Imago employs an average of two hundred employees across these venues and in its support centre, it generates revenues of circa £12m per annum and all profits are Gift Aided to Loughborough University. The ambition of the business can be understood by reviewing its existing three-year plan, (slide 3) and reflecting on its goals to be delivered by 2027, (slide 4). Both plans are presented in a high-level view, the overarching goal is to have a fully invested business, recognised as a national employer of choice with excellent customer feedback and growing like for like sales and profit.
- Imago is about to embark on a £4million investment into Burleigh Court, which will transform the customer offer as well as providing new and improved facilities.

# IMAGO Plan on a Page 2021



# IMAGO Plan on a Page 2024



# Project Sky



EXTERNAL ENTRANCE



CONFERENCE BAR

# Project Sky



# Main Risks Identified in Risk Register

Risk Category	Risk Area	Probability (1-3)	Impact (1-3)	Risk Score	Mitigation	Mitigated risk score	Trend
Health & Safety	Food safety, fire, water safety, personal injury	2	4	8	Health and Safety and Food Safety, Clear policies and robust internal auditing of operations with clear accountability. Statutory checks completed in line with LU Policy. Independent checks conducted to ensure compliance.	4	
Failure to achieve financial targets	Revenue has risk due to global events and changeable government policy	2	3	6	Continual activity to drive revenue and control costs. Identify emerging guest groups and profitable opportunities	4	
	Increase in significant costs such as team, utilities, food	3	3	9	Monthly cost review, agile supplier management, continued team productivity and efficiency activity	4	
	Potential cash risk if significant unplanned cost investment is required	2	3	6	Monthly cash flow, forecasting and PL management.	2	
Reputational damage	Social media visibility/adverse PR	1	3	3	People polices reviewed and redistributed to all team members	2	
Business continuity	IT systems website, e-mail, banking and telephony	1	2	2	Contingency planning, IT Services' disaster recovery plan, communication plan	2	
	Loss of key services such as electricity, water and gas	2	3	6	Contingency planning, utilities disaster recovery plan in line with LU strategy.	6	
	Project Sinclair- Phase 1 BAU	2	3	6	Phase One complete, BAU Monthly review and action plan- scoping for further phases	6	
People	Recruitment and loss of key personnel	2	3	6	Individual PDP in place. EVP Focus	4	
Quality	Project Sky-Overrun/Budget	1	3	3	We can change scope in order to correct budget or significant time overrun	2	
	Customer service	1	2	2	Recruitment and selection process, investment in management training and team engagement	2	
Nature	Floods, lightning strike, adverse weather	1	2	2	Contingency planning, insurance	2	
Legislation	HR legislation, Data Protection (GDPR), PCI Compliance, Criminal Finance Act, Procurement and Licensing	1	3	3	Awareness of government legislation, effective communication and training. Following best practice.	3	

# Project Sky Risk Register

Date added	Title	Description	Risk Status	Likelihood	Impact	Risk Score	Actions
27/10/2023	Cost for works overall cost exceed the budget available upon tender return	The current market conditions and parameters of the project may lead to a higher cost at tender return stage and a requirement to value engineer the scheme.	Open	4	2	8	The project has been competitively tendered in order to seek the best price. The tender documents have been issued earlier than initially planned to build some time in to the programme to value engineer the scheme post tender.
27/10/2023	Operational / live hotel	Challenges surrounding the contractor working within a live hotel environment and potential impact on hotel operations.	Open	3	4	12	Imago have been instrumental in developing the phasing and operational parameters for the contractor and will be involved in the assessment process and selection of the preferred contractor. The Contractor's method statement and logistics plan to be interrogated at tender return stage and ensure competent Contractor is appointed who has experience working in a live environment. Further activity to mitigate is for Imago to make the contractor aware of the requirements to manage noise, dust and means of escape during the work.
27/10/2023	Failure to complete the works	Should the contractor fail to complete the works or complete the works satisfactorily then this may lead to a scenario where an alternative contractor is required to complete the works.	Open	2	3	6	The contract will set out the requirements of the scheme and obligations of the contractor. Should the contractor default on their obligations under the contract, there will be contractual mechanisms that Imago can pursue to remedy any issues should this situation arise.
31/10/2023	Site access	Limited access to the enclosed courtyard, construction materials and bulky steel sections to be craned over the existing hotel	Open	4	3	12	Contractor to provide logistics plan as part of their methodology. Client Team to review/scrutinise methodology and agree with the successful contractor in advance of starting on site to ensure appropriate methods of working. Further mitigations would be that if there is a requirement to close the public footpath,
27/10/2023	Abnormal ground conditions encountered e.g. contamination	Could lead to increased costs and programme duration.	Open	1	3	3	SI survey has been carried out; no issues currently identified. Contingency allowance in cost plan.



# Details of any significant Incidents or Near Misses in the last Year and Response to those Incidents

- There have been no serious accidents or incidents in this quarter.
- We continue to track incidents by venue and by reason, which allows us to prioritise our activity.
- In line with LU practice we utilise EVOTIX for the tracking of all incidents and near misses.

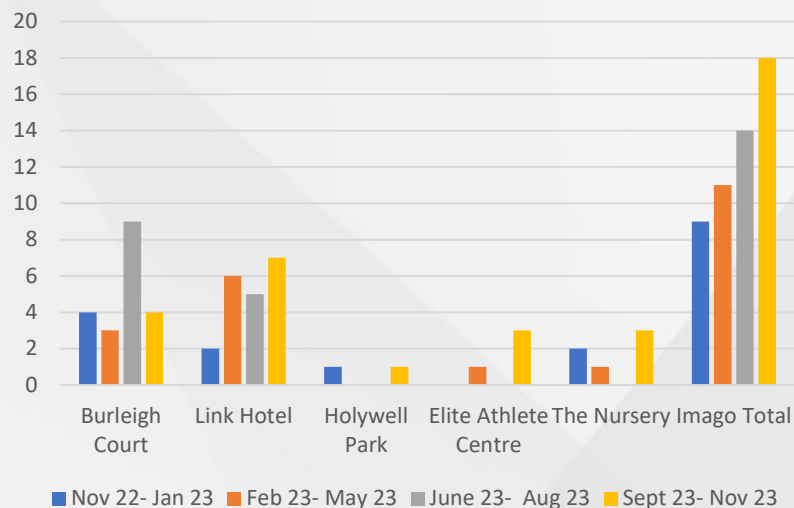
## INCIDENT REPORTS AND NEAR MISSES - QUARTERLY SUMMARY

Site Name	Nov 22- Jan 23	Feb 23- May 23	June 23- Aug 23	Sept 23- Nov 23
Burleigh Court	4	3	9	4
Link Hotel	2	6	5	7
Holywell Park	1	0	0	1
Elite Athlete Centre	0	1	0	3
The Nursery	2	1	0	3
Imago Total	9	11	14	18

We continue to have a high number of false fire alarm evacuations at the Link. Fire contractor has advised there is no simply remedy for this and to continue reporting.

Good level of reporting issues

All incidents reported with the LU H&S team and closed once reviewed

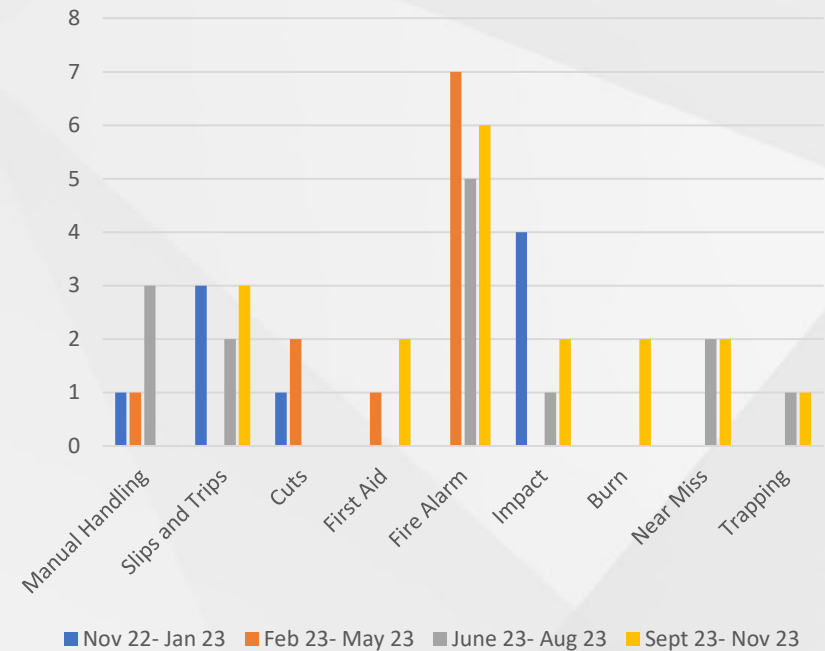


INFORM

## INCIDENT REPORTS AND NEAR MISSES - DETAIL

Theme	Nov 22- Jan 23	Feb 23- May 23	June 23- Aug 23	Sept 23- Nov 23	Total
Manual Handling	1	1	3	0	4
Slips and Trips	3	0	2	3	8
Cuts	1	2	0	0	3
First Aid		1	0	2	3
Fire Alarm		7	5	6	18
Impact	4	0	1	2	7
Burn			0	2	2
Near Miss			2	2	4
Trapping			1	1	1

Here is the breakdown by category from the previous twelve months reported incidents, highlighting our trends and areas of focus. The plan being to focus proactively on the areas highlighted instead of reactively responding to them.



INFORM

# Areas of Focus / Development

- As part of our sustainability mission Kate Brown, Burleigh Court Deputy Manager and member of our sustainability task force has completed Carbon Literacy Training. This knowledge will help in the shaping of this group.
- Steve Powell, Operations Director attended the latest University Sustainability Strategy workshop on the 23<sup>rd</sup> October, providing feedback and proposals in relation the prioritisation of the plan and how this will impact Imago.
- 2 x Senior Managers went through Manual Handling Risk Assessment training to enable them to deliver to the Imago team. They are now focusing on this, prioritising key risk tasks whilst maintaining online training for low-risk areas.
- Regular attendance of both LUNZ and Sustainability Sub-Committee.

# Areas of Focus / Development

## TRAINING STATISTICS

Target compliance: 95%

October Imago compliance: 93%

	Course	Oct 23 Compliant
Salaried Employees	Information Security	97%
	Fire Safety Plus	98%
	Diversity	93%
	Display Screen Equipment	92%
	Basic Food Hygiene	97%
	PCI Compliance	95%
	Fire Marshal	96%
	Anti-Bribery Act	100%
	Manual Handling -	89%
	COSHH	71%
	Allergens	96%
	First Aid	96%
	Safe Driving	88%

### Burleigh Court

Employees 90%

Casual Workers 91%

### EAC & The Link

Employees 89%

Casual Workers 84%

# Leadership activity

- Steve Powell completed NEBOSH.
- Venue Managers are scheduled to complete IOSH in 2024.
- Quarterly Health & Safety meetings taking place with relevant LU stakeholders.
- Internal Horizon training – Health & Safety module for all managers within the business, completed in September 2023. Covering key principles of managing Health & Safety and their responsibilities to themselves and the business.

# Progress on Health

- Establishment of an Imago wellbeing group.
- As part of our commitment to be a recognised employer of choice, we have partnered with Great Places to Work. As a result we can conduct 2 full employee surveys enabling us to address areas for improvement and recognition. This also allows us to benchmark Imago against its competitor set.

## ABSENCE

### ABSENCE RATE

Current absence rate in UK (% of working hours lost due to sickness) is 2.6%  
Previous Quarter (Q4) total was 3%

	Aug	Sept	Oct	Q1 Total
Number of days lost due to absence	84	95	130	309
Total working hours lost due to absence	516	573	671	1760
Total working hours in month	20150	20053	20357	60560
<b>Absence Rate (%)</b>	<b>2.6%</b>	<b>2.9%</b>	<b>3.3%</b>	<b>2.9%</b>

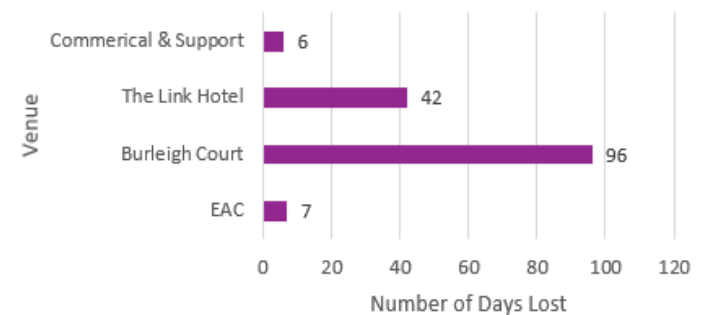
**LONG TERM ABSENCE (Days)\*** 158      **SHORT TERM ABSENCE (Days)** 151

\*defined as continuous absence of 4 weeks or more

### REASONS FOR ABSENCE (Short Term absence)

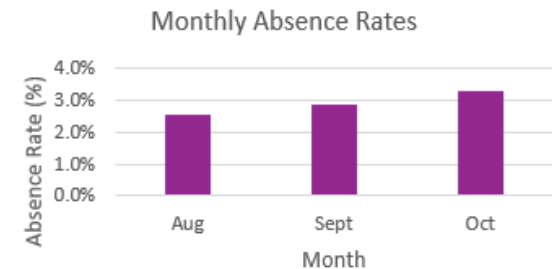
Reason for Absence	Q1 Total number of days lost	Percentage of total lost days
Stomach/digestive/gastrointestinal/nausea	43	28%
Coughs/cold/flu	33	22%
Muscoskeletal (incl. back/neck problems/carpel tunnel/tendonitis)	22	15%
Mental health (incl. fatigue/nervous debility/anxiety/stress /depression)	18	12%
Covid-19	9	6%
Unknown/not specified (no RTW form completed)	7	5%

### ABSENCE BY VENUE (Short Term absence)



Venue	EAC	Burleigh Court	The Link Hotel	Commercial & Support
Working hours lost	42	420	225	45
Available hours	4144	32379	9891	14334
<b>Hours lost as % of available hours</b>	<b>1.0%</b>	<b>1.3%</b>	<b>2.3%</b>	<b>0.3%</b>

### ABSENCE YEAR TO DATE



INFORM



## PEOPLE

### Town Halls

During November, we have held our bi-annual town halls. This is an opportunity for the team to hear directly from our Chief Executive about our 2023 achievements, our plans for 2024 and an open floor to ask any questions.

### World Mental Health Day

We marked October 10<sup>th</sup> with a week full of activities to help our team's wellbeing. We focussed on nutrition, exercise and the power of talking. Across the week team could join in with bootcamp, a group run, 'tea and talk' sessions at the Link & Burleigh Court, nutrition classes with our EAC Head Chef, massages provided by our therapists and a guided meditation session.

It was great to see so many of the team taking part and conversations taking place between team members that wouldn't usually happen during the working day.

### Wellbeing Group

As part of our wellbeing week, we launched our wellbeing group. A group of volunteers from across the business who will focus on providing activities for our team to support their wellbeing. The first activity the group have launched is the reverse advent calendar where team can donate goods during the advent period that will be donated to Loughborough foodbank.



INFORM

# Environmental KPIs

- Our headline KPI to reduce our carbon footprint by 2030 (scope 1 and 2).
- We are targeting food waste
- Utility consumption
- Establishment of ethical supply chain.
- We are about to become 50% plant-based food offer.
- As part of our refurbishment plan, we are replacing fluorescent lighting with LED equivalent, delivering a 50% saving.
- Contribution and accountability to the delivery of ISO14001.

# Main Environmental Risks Identified

- Food supply chain security.
- Engagement with corporate customers who may not have clear ESG objectives.
- Community relations.
- As part of Project Sky, our impact on the local eco-system.
- Ability to reduce single use plastics.

# Progress in Managing Issues Identified

- Quarterly supplier review, to protect robustness of supply chain.
- Sustainability manifesto being developed to assist with carbon neutral meetings
- Currently developing carbon calculator in order to understand both Imago and our customer's position.

# Significant Achievements / Practices that Other Areas Could Learn From

- Logit digital system for managing due diligence checks across the building. Gone through 2 rounds of John Gee audits and 1 EHO – with positive results.
- Implementation of new contracts of employment, across the business to aid wellbeing for all employees, for example increased bereavement leave.
- Establishment of Helping Hands initiative allows employees to receive a one-off payment in times of hardship.
- Our partnerships with Sense and Holmefield College giving their students the opportunity to be in a work environment.
- Commitment to have a mental health first aider available 24 hours a day, 7 days a week.
- Clear Vision and Values that is used as a lens for all decisions across the business (slide 22).

VISION:

# CREATE A PLACE WHERE PEOPLE LOVE TO BE

MISSION:

## CREATE A WORLD-CLASS BUSINESS THAT CONSISTENTLY DELIVERS FABULOUS MEETINGS, DINING, AND SLEEP

### FOR OUR TEAM

We celebrate individuality, strive to identify talent and give everybody the opportunity to grow. We provide a safe, inclusive, fun environment built on our key value of kindness.

### FOR OUR GUESTS

We welcome everybody and connect people through tailored experiences. We serve quality, generosity and genuine hospitality built on our key value of caring.

 <h2>KIND</h2> <p>We're kind to each other and think of ways we can help each other and our guests on a daily basis.</p>	 <h2>CARING</h2> <p>We care about our guests, our teams, and our company because caring means actually doing something positive.</p>
 <h2>ACCOUNTABLE</h2> <p>Every one of us is a decision maker empowered to do what we feel right for our guests and own those decisions.</p>	 <h2>SUSTAINABLE</h2> <p>We take decisions that are sustainable, not just to preserve our environment, but to make our business fit for the future.</p>
 <h2>AMBITIOUS</h2> <p>We're ambitious with our ideas to enable ourselves and our business to grow and make great experiences for us and our guests.</p>	 <h2>ETHICAL</h2> <p>We conduct ourselves and our business in an ethical way and make decisions because they are the right ones to make.</p>

# **HSE Committee School and Professional Service Progress Update 2024**

## **E&FM – Catering, Domestic & Residential Services (CDRS)**

# CDRS Remit

## Service Provision

- Catered Halls, Retail and Delivered Catering
- Domestic Services and Logistics
- Academic Buildings and Offices
- Science & Enterprise Park
- Food Safety
- Accommodation Compliance (UUK Audit)
- Operational Teams
- Strong presence on campus 18/7
- Majority of staff on Grades 1-3
- 70% staff are female
- Some staff members have worked at the university for over 50 years
- High turnover of part-time staff
- 40 & 52 week contracts

**To note: largest professional services department with the highest number of part-time and casual workers**



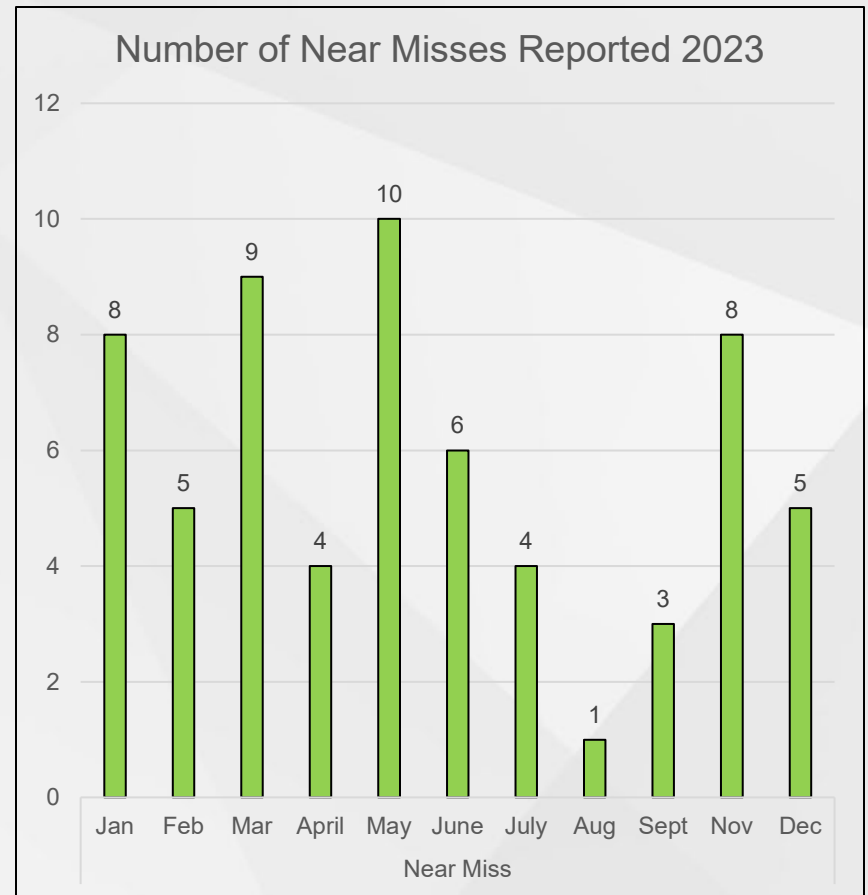
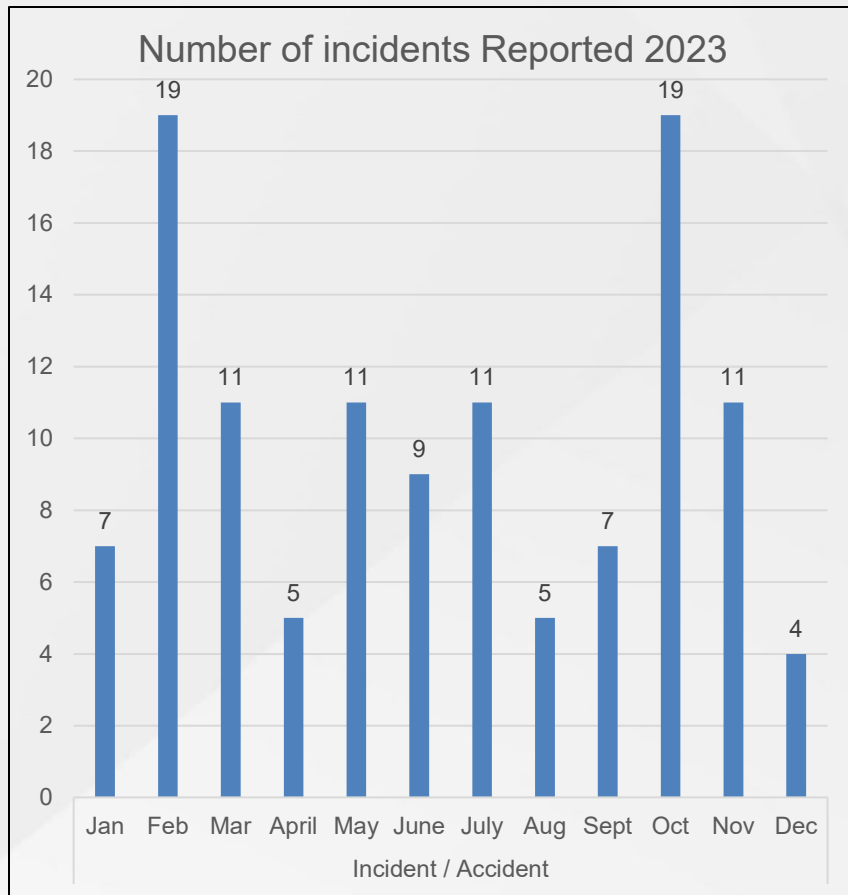
# Overview

540 colleagues On-campus	3000 Deliveries and Events 166k Guests	98% Training completion  7500 hours	60k offices 75k Bedrooms cleaned yearly
2m Transactions in 12 Retail Outlets  630k meals in 7 Dining Halls	34 Independent External food audits in 2023 Average score of 94%	15 EHO Food Audits in 2023 14 Scoring 5* and 1 scoring 4*	11 'Safety Champions' and 'Risk Assessment Champions' representing all areas
17000 Food safety Auditable records	74 Risk assessment in last 2 years	65 Management Safety inspection tours	5200 rooms and buildings flushed to prevent Legionella during Christmas

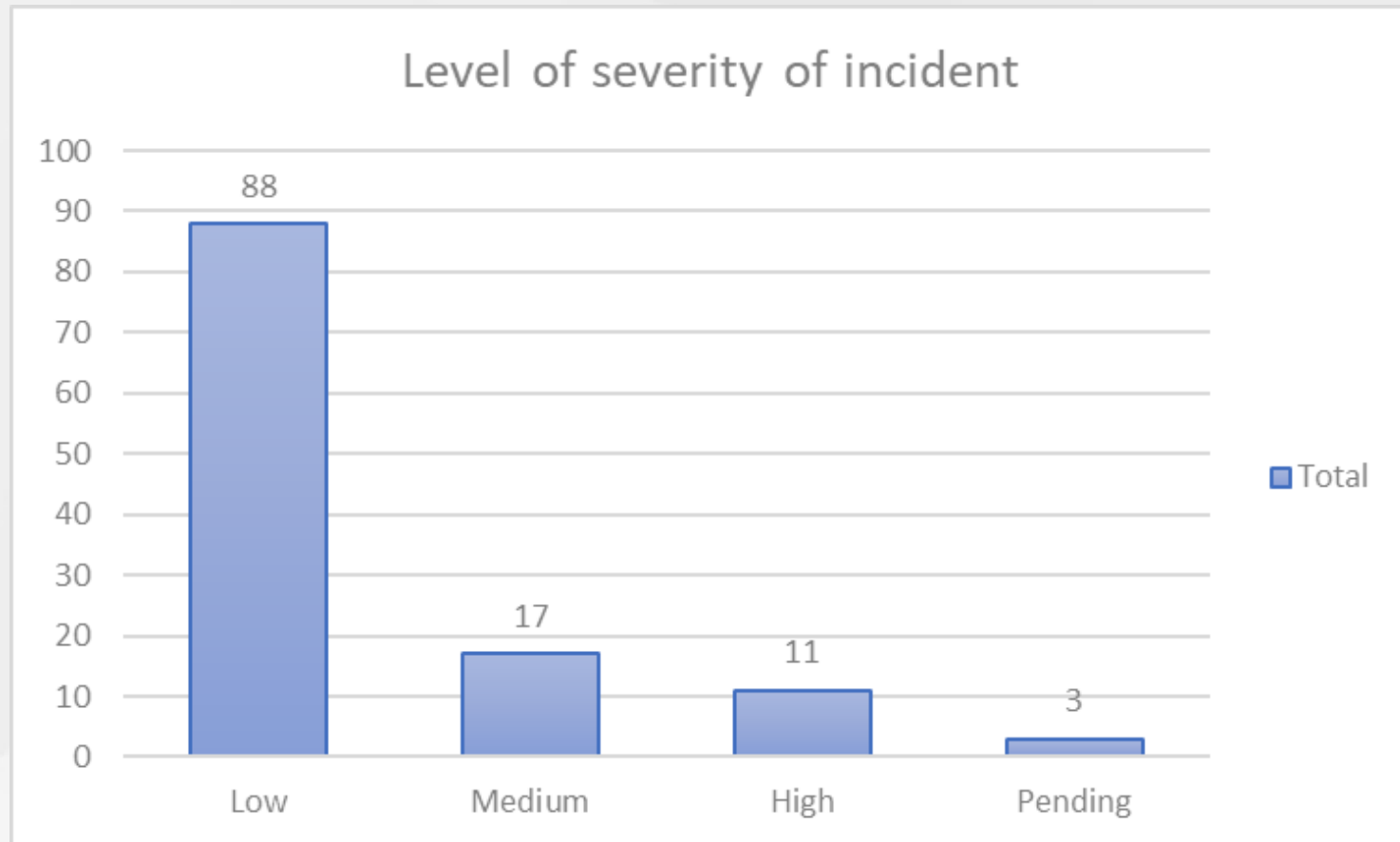
# HSE KPIs

- No of External Food Safety / EHO Audits YTD - 49
- No of External Food Safety Audits planned for year - 34  
(This does not include checks within our operations management)
  
- Residential Safety Audits - 14 planned for next year - 14
- No of HSE Committee Meetings in last year – 8
- 32 additional H&S Meetings covering every member of staff
  
- Number of incidents YTD (Jan-Dec 2023) - 119
- Incident rate per 1,000 staff (Jan - Dec) - 220
- No. of staff receiving training YTD (Jan - Dec) - 96%
  - *Catering Services – 97%,*
  - *Domestic Services – 96%*
  - *Residential Services – 95%*

# Incident and Near Miss Reporting



# Number of incidents by severity



## Details of any significant incidents or near misses in the last year, and response to those incidents.

### **5 RIDDOR'S in 2023**

<b><u>Type of Incident</u></b>	<b><u>Response</u></b>
<b>Lifting Food tin</b>	Reiterated manual handling training, including lifting was given.
<b>Lifting pack of baked bean tins</b>	Retrained in correct manual handling processes, including using the provided trolleys for movement of heavy goods.
<b>Lifting Toilet rolls</b>	Retrained in correct manual handling processes, including using the provided trolleys for movement of heavy goods.
<b>Wardrobe door fell off hinges in student bedroom</b>	End of term visual inspection of all wardrobe doors in student accommodation, student advised to report any maintenance issues.
<b>Slip incident on wet floor after mopping</b>	Additional dry mopping technique advised by H&S and implemented in consultation with staff group.
<b>All investigations were completed, Risk assessments reviewed ,Working practices improved and adopted in practices</b>	

# High and Medium Severity incidents overview

High and Medium Severity Incidents	Actions, we have taken	Total
Carrying equipment - Hoover	Lighter vacuum provided.	1
Cleaning chemical	Data Sheets, method statements and RA available for all chemicals. Staff reminded to follow these.	1
Falling object -- curtain pole, iron board, furniture in storage.	All other poles checked for stability. Students reminded to put iron board away after use, Reiterated the importance of correctly storing excess furniture to all involved in the movement of furniture. Area was made safe	3
Cuts -- Broken glass, broken ceramic, rough edges,	Methodology reviewed, further precautions added, equipment replace	2
Kitchen knife injury	Further training provided on how to use knife	1
Fall from height off a chair onto worktop - SOP not followed	Reminder about using steps provided and retraining given	2
Gas cylinder leak	Updated LPG Risk Assessment completed. Training given	1
Hot food and liquid handling related incidents in catering	Oven clothes, gloves and gauntlets are provided. Training was provided and reiterated	3
Student Injury by tail lift	Full investigation carried out, tail lift training provided to relevant staff, safe routes introduced as well as mgmt. checks	1
Trapped in freezer	Faulty door release panel investigated; all other freezers checked. Freezer RA reviewed and amended	1

# High and Medium Severity Incidents Overview

High and Medium Severity Incidents	Actions, we have taken	Total
'Rolled' ankle	No Action Required	1
Allergen incident , SOP was accurately followed, student was not aware of allergy	No Action Required, Visible signs warning all diners to make staff aware of allergens is present, all staff attend annual allergen training and Documents maintained	1
Fall due to prescribed medication	No Action Required, colleagues aware	1
Ongoing Knee Injury	No Action Required	1
Parent of student bumped head	No Action Required	1
Student trapped finger in doors	Door closures examined but no faults found.	2
Tripped on stairs	No Action Required, nosing and stairs were checked by colleagues	1

- Majority incidents are of a low level of severity.
- People are willing to report due to increased awareness and communication.
- Repeated Focus on near miss reporting and reiterated by toolbox talks
- Incidents Risk assessments and work practices reviewed and implemented.
- Further breakdown of RIDDOR's, High and medium severity incidents provided.

# Training

Termly Target	90%	November	99%	December	96%	Status	Above target
---------------	-----	----------	-----	----------	-----	--------	--------------

- Consistently above target for H&S Training in November and December 2023 with all departments exceeding target of 90%.
- Catering Services – 97%
- Domestic Services – 96%
- Residential Services – 95%



# Main Risks Identified

- Food Safety with potential to Impact a large population.
- Allergen Compliance (Natasha's Law) - High exposure with over 2m transactions per year.
- Sleeping Accommodation - Fire safety risk and ageing infrastructure.
- Incidents related to Slip trip and fall and Manual Handling.
- Potential Loss of Utilities affecting student experience and contractual compliance. Aging estate.
- Room standard significantly falling behind competitors.
- Staff morale and potential burnout due to workload.
- Balance between core priorities and other requirements.

# Progress in Managing Issues Identified

- Robust annually review Food Safety Policy, Access to External Auditor and experts.
- Allergen risk profile is very high due to exposure and high chances of human error. Mitigations provided are training, automation as well as external audits.
- FRA actions now shared with Hall Manager and completed, Periodic planned checks, UUK audit and compliance checks.
- Business Continuity Planning and on call duty rotas including Escalation procedure established with University's major incident group.
- Collaborative work and open dialogue to balance between core services and supporting tasks i.e HR, H&S, Procurement, Finance.
- Focus on slip/ Trip/Falls and Manual handling – toolbox , training with Human application and specialised training as well introduction of manual handling risk assessments and tail lift operation given major logistics operation in the university.
- Creating pool of casual staff to ease pressure especially during peak activity.
- Proactive planning based on the cyclic nature of business. i.e. Majority of training delivered at the start of term based on risk analysis and exposure.
- Identifying level and type of training to meet compliance in relation to task as well risk profile.
- Weekly touchpoint to raise/Flag any immediate H&S issue or concerns for swift action and resource allocation - working well.

# Significant Achievements / Practices that Other Areas Could Learn From

- Internal audit for accommodation compliance in 2023 – UUK methodology adopted for future audits readiness
- Consistently High external audit score for food safety and % completion of training delivery.
- Introduction of work-based risk assessments to make them user friendly
- Access to consortia for subsidised compliance training as well as benchmarking of best practices.
- Consolidation of COSHH products and risk assessments across 3 Departments, sharing best practices and benefits from economies of scale. Move to low-risk chemicals.
- Effective and Dynamic allocation of resources to ease the pressure on Front Line Staff.
- Bringing teams together with a better understanding of health and safety by appointing ‘safety champions’ in all our departments who work at a ‘ground level’ daily and hence enabling the sharing of health and safety more reachable to all.
- Better understanding of risk assessments and manual handling by training Risk assessment and manual handling ‘champions’ in every department.

# Challenges/Outstanding Priorities

- Recruitment and retention challenge in the current market across all Grades and needs aligning with the market to attract the right level and number of staff.
- Impact assessment and consultation with operational teams needed when implementing changes or introducing new initiatives.
- Management Information tools – live information, easy to use and compliance dashboard will save on admin, response times and duplication i.e. Training Status at a glance, H&S dashboard with key information, repetitive information reports.
- Need for focused training and policy implementation suitable for operational areas due to scale and size in direct relation to resources and double impact to cover services.
- Additional demands on already stretched Front Line managers and staff impacting morale.
- Level of sickness and review of associated processes with HR to manage this to ease pressure on colleagues at work. Ageing workforce in relation to manual tasks .
- Residential/Catering - Food and General Waste.
- Reoccurring Pest infestation in older buildings.
- Supply chain alignment with university's future sustainability targets.

# Progress in Managing Issues Identified

- Working with Occupational Health to reduce 'slips, trips and falls'.
- Process to manage 'Reasonable Adjustments'
- Working with HR business partner to manage long-term sickness.
- Maintain discipline and focus on:
  - UUK Audit preparation
  - Food Safety DAP responsibilities.
  - Pest control process and contract in place to react.
- Working on increasing engagement with students to tackle waste and recycling issues i.e. 'Love Food, Hate Waste'.
- Consolidation production methodology delivering multiple offers with same core production base .

## **Update on Critical risk, strategy, control and compliance – Chemical safety arrangements**

Origin: Oliver Preedy

### **Action Required:**

None required

### **Executive Summary**

The following item contains the slides providing an update on Critical risk, strategy, control and compliance with regards to the Chemical safety arrangements in place at the University. The slides outline, what a good chemical safety management system requires, discusses the Universities risk profile with respect to chemical safety and the controls currently in place. The incident data for 2023 as well as the performance indicators are reviewed to discuss the effectiveness of the control measures. Finally, three emerging risks are outline which are:

- Increase in work with flammable gases.
- Diverse range of chemicals with no centralised inventory system.
- Hazardous waste collection.

Overall, chemicals are managed well with good levels of engagement which allows emerging risks to be identified and addressed.

### **Other Committees Consulted**

Chemical safety committee.

### **Equality Diversity and Inclusion Considerations**

None applicable

### **Paper Details – Presentation slides**


### **Supplementary Reading - None**

Copyright © Loughborough University. All rights reserved.

# Update on Critical risk, strategy, control and compliance – Chemical safety arrangements


Oliver Preedy

1



## Outline

- What good chemical safety looks like
- Chemical lifecycle
- Current picture
- Controls
- Potential risks

 Loughborough  
University

#InspiringWinners since 1909

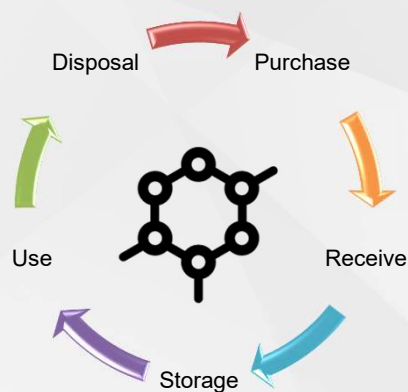
2

## What does good chemical safety look like?



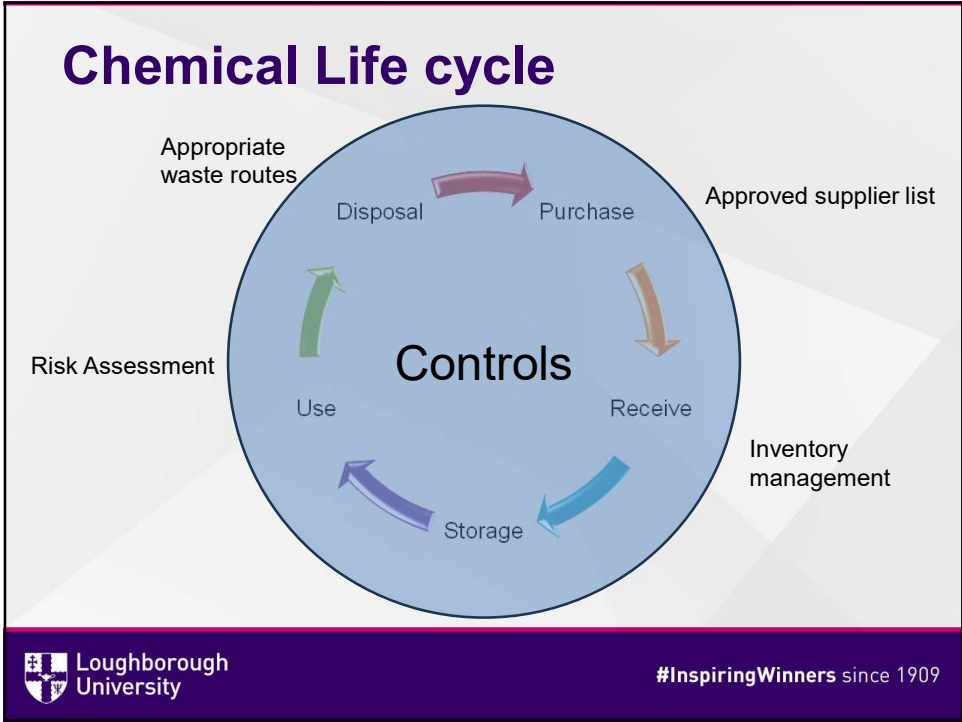
3

## Chemical Life cycle

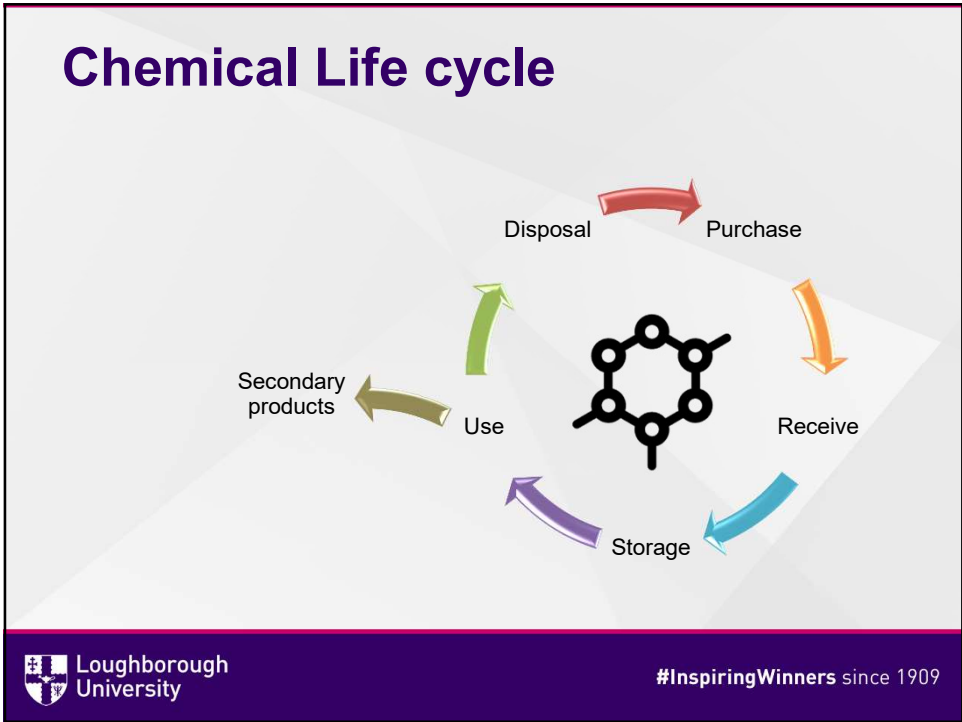


4





5



6

## Current Picture




Risk Profile      Incident Data      Compliance


 Loughborough University      #InspiringWinners since 1909

7


## Risk Profile



**Routine activities : Low hazard but high use**  
Estates and Facilities management  
Cleaners  
Sport (Swimming pool)



**Specialist Activities: Increased hazard but lower use**  
Laboratories and workshops

 Loughborough University      #InspiringWinners since 1909

8

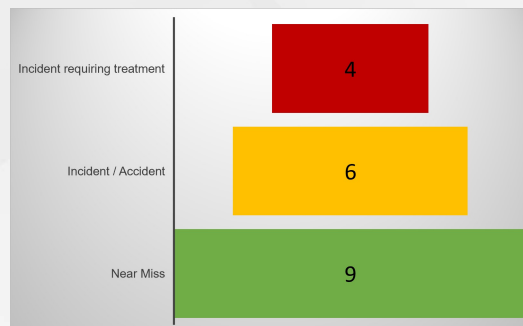
## Risk Profile – Controls

Policy and Guidance	<ul style="list-style-type: none"> <li>• Defined roles and responsibilities</li> <li>• Cradle to grave chemical management strategy</li> </ul>
Utilisation of Agresso	<ul style="list-style-type: none"> <li>• Chemical ordering codes</li> </ul>
Chemical safety committee	<ul style="list-style-type: none"> <li>• Community of best practice</li> </ul>
Standardised risk assessment forms	<ul style="list-style-type: none"> <li>• Easier to audit</li> </ul>
Audits and inspections	<ul style="list-style-type: none"> <li>• Physical and desktop</li> </ul>

9

## Incident Data

- 15 – reported incidents
- 4 requiring minor treatment
  - Burn or scald managed by first aid



10

## Compliance

- Good level of compliance with the KPI's with a plan in place



## Potential Risks (Top 3)



Increase in work with flammable gases (Hydrogen/Methane)

- Suitability of existing infrastructure (extraction)



Diverse range of chemicals with no centralised inventory system



Hazardous waste collection – scope of material readily accepted by contractor is decreasing

## Summary



Procedures in place to manage hazardous chemicals are working effectively



Good community of practice surrounding chemical safety



Low number of incidents reported for 2023



Some emerging risks which are being incorporated into the chemical management strategy



## Questions

**HSE Health, Safety and  
Environment Committee**



**Loughborough  
University**

## **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**

None

## HSE Committee Report –

Subject area / Statement	Issue to note	Action Required from HSE Committee
<b>Compliance</b>		
<p>Legionella in Towers The water system in Towers continues to be closely monitored. Point of use filters are in place throughout the West Tower and an online dosing unit is in operation. Disinfection will take place during the Easter break with further engineering work on the distribution pipework over eth Summer. The aim is to get to the point where point of use filters can be removed from handbasins. Towers will be occupied through the 2024/25 academic year.</p>	Continued managed risk within Towers.	To note
<b>Policy &amp; Procedure</b>		
<p>Fieldwork The fieldwork form has now been used in SSH. Final comments will be gathered and the form and updated policy will be launched cross University</p>	To note progress	Updated policy will need approval from HSE Committee either via E mail discussion or at next meeting
<p>Permit to Work System A long standing vulnerability has been the use of a paper based Permit to Work system (PTW). The PTW system is used to carefully control high risk work, particularly on systems with a higher risk to life eg High Voltage systems, pressure systems etc,</p>	To note progress	

<p>An electronic system which gives greater reliability has now been purchased and is being deployed. This also give the opportunity to refresh the policies and training.</p>																
<p><b>Occupational Health and Wellbeing</b></p>																
<p>1:1 health MoTs run by Leicestershire County Council are being introduced progressively. Up take has been high with sessions being fully booked within hours of release.</p>	<p>To note initiate introduced in response to staff survey and preferences</p>	<p>To note new initiative and demand</p>														
<p>The implementation of the OH specific software, allows a greater insight into the OH team activity</p> <table border="1" data-bbox="206 635 1120 983"> <thead> <tr> <th>Type of appointment</th> <th>Volume</th> </tr> </thead> <tbody> <tr> <td>Management referral initial consultations</td> <td>504</td> </tr> <tr> <td>Management referral review appointments</td> <td>148</td> </tr> <tr> <td>Occupational Health Physician appointments</td> <td>50</td> </tr> <tr> <td>Self referral consultations</td> <td>103 (date from June only)</td> </tr> <tr> <td>Health surveillance appointments</td> <td>121 (data from May only)</td> </tr> <tr> <td>Vaccines</td> <td>561</td> </tr> </tbody> </table> <p>Current staffing – 3.1 FTE as a mix of 0.8 admin and wellbeing support, 0.8 OH manager and 1.5 clinician support</p> <p>Wellbeing activity: 6 x webinars, 11 in person events, 2 x MOT days</p> <p>Health surveillance – a recent change in the requirement for health surveillance when working with noise has led to increased requirement for audiometry testing, risk assessment reviews to incorporate noise exposure dosage and a significant piece of work which is currently underway incorporating Health and Safety. The changes in legislation also require a greater number of appointments</p>	Type of appointment	Volume	Management referral initial consultations	504	Management referral review appointments	148	Occupational Health Physician appointments	50	Self referral consultations	103 (date from June only)	Health surveillance appointments	121 (data from May only)	Vaccines	561	<p>Activity is in line with the University strategy both in terms of proactive activity and supporting colleagues who are in need.</p> <p>The number of appointments has increased 4 fold over recent years and is now at or above capacity</p>	<p>To note the high volume of proactive and reactive activity aligned with the University strategy</p>
Type of appointment	Volume															
Management referral initial consultations	504															
Management referral review appointments	148															
Occupational Health Physician appointments	50															
Self referral consultations	103 (date from June only)															
Health surveillance appointments	121 (data from May only)															
Vaccines	561															



<p>with the Occupational Health Physician as any indication of noise induced hearing loss has to be referred to a physician for confirmation.</p> <p>Health surveillance requirements across campus are proving challenging – 2024 will start a substantial piece of work to try to ensure we are compliant with legislative requirements and that surveillance is being offered appropriately. This however has been a known concern for a number of years and the risk assessment/health surveillance process needs a complete overhaul to ensure compliance.</p>		
---	--	--

<p><b>Laser Safety</b></p>		
<p>John Tyrer the University Laser Safety Advisor has left his role at the University. The HSE team are actively trying to identify a replacement mid term. Short term the post will be covered by a mixture of colleagues from the H&amp;S team and by buying in consultancy support as required.</p>		<p>Committee to note current position</p>
<p><b>Radiological</b></p>		
<p>The Environment Agency will be conducting an inspection on the use of and control of radiological material on 30<sup>th</sup> January. This is a routine inspection and the belief is that things are in good order.</p>		<p>Committee to note</p>

<b>Decommissioning of Graham Oldham</b>		
The Graham Oldham building has been decommissioned over the last 5 years and has now been demolished		
<b>Fire</b>		
Building Safety Act - The immediate implications of the building safety act have been actioned i.e. Towers has been registered. The act brings some amendments to other legislation such as the Regulatory Reform (Fire Safety) Order 2005, which are now in force, and we are confident that we are largely compliant with these, albeit still trying to work out what much of these changes 'look like' in reality – which is normal for new legislation.		HSE Committee to note compliant position
A fire compliance issue has been identified in Falkner Eggington Court blocks issue regarding the location and subsequent fire stopping of a mechanical ventilation heat recovery unit and the single staircase and bedrooms. The university has been and continues to mitigate this issue with the enhanced fire safety arrangements, but longer term a compliant engineering solution needs to be found to remove the reliance upon management arrangements. The management solution is not sustainable long term. The fire safety lead is working with E&FM colleagues to find a solution that also supports the ventilation requirements of the buildings.	To note risk and action	
It has been identified that the Fire Design Strategy has not been followed in a number of recent projects.  These have been addressed and a training session has been delivered for new and existing project managers. The training had a heavy emphasis on fire design.		HSE Committee to note progress
The refuge points in the UPP halls (all 65) have now been replaced and upgraded to the same as the campus wide solution offered by Alerter Group. This resolves all the historic issues we have had with UPP over this, providing a solution the university can have confidence in.	HSE Committee to note risk reduction and progress.	HSE Committee to note progress

An outstanding action is to resolve issues with the pull cords in the adapted rooms, but these can be linked into the newly installed units, and there is a plan is to do this. These actions will resolve an issue that has been outstanding for nearly 14 years.		
<b>Chaplaincy</b>		
The new Lead Chaplain Elizabeth York joined the University in January.		

## Health, Safety and Environment Committee



### **Annual Report Health, Safety and Wellbeing**

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

#### **Executive Summary**

Report of annual progress. The report sets out the priorities for 2023/4 and the progress made during 2022/3

#### **Other Committees Consulted**

None

#### **Equality Diversity and Inclusion Considerations**

#### **Paper Details**

##### **Action Required:**

To approve report

**Review of Progress on the Health and Safety Service Plan for  
2022/23 and 2023/24 Plan**

**Purpose of Report**

**Section 1 Health and Safety Service Vision and Strategic Principles**

**Section 2 2022/23 Progress on strategic items**

**Section 3 Strategic Items and Work Plan – 2023/24**

**Section 4 2022/23 Review**

**Section 5 Incident Data**

## **Purpose of Report**

The purpose of this report is to review the progress made during 2022/23 and to review the annual plan for this time period.

In addition to this, the Health and Safety Service plan for 2023/24 is outlined.

The report is in four sections: -

- Section 1: The Health and Safety Service Vision and Strategic Principles
- Section 2: 2022/23 progress on strategic items
- Section 3: Strategic Items and Work Plan – 2023/24
- Section 4: 2022/23 Review
- Section 5: Incident Data

# Health and Safety Service Vision and Strategic Principles

## Our Vision

The vision and principles of the Health and Safety Service remain unchanged from 2022/23

## Vision and Principles

In light of the revision to the University strategy, the Health, Safety and Wellbeing Service has sought to align its vision and principles with the new strategy.

On this basis the Service has updated its vision which is now.

Creating Better Futures -

By working together we will inspire and enable all so that we create a future where health, safety and wellbeing is central to the way we work and where excellence is achieved. Our aim is to become a beacon of best practice.

The Service has also updated its principles to reflect the University strategy

### *Responsible*

- Each individual should be aware of the risks they own
- Those who own the risk should be aware of their responsibilities for the assessment and management of that risk
- Structures will be put into place to ensure a good oversight of the most significant risks to the University and how they are being managed.
- Responsibilities will be clearly defined and individuals will be held accountable for the delivery of their responsibilities

### *Authentic*

- We will be honest and transparent in the way that we work.
- We will show respect to our colleagues and each other and work in a supportive way in order to find collaborative solutions

### *Adventurous*

- We will be an enabling and solutions based service
- We will explore widely to identify new and innovative solutions
- We will deliver what we promise and not promise things we can't deliver
- We will continue our personal development so that we are our best selves.

### *Creative*

- Using technologies, internal expertise and drawing on external networks we will strive to find solutions providing a route, rather than perceived barriers, to accomplish and deliver

### *Collaborative*

- We will work flexibly drawing on the skills and competencies of team members and the wider University
- We will communicate clearly and imaginatively and ensure that individuals can become competent to undertake the tasks required.

## **2022/23 Recognition and Progress**

2023 was a busy year. The Director of Health, Safety and Wellbeing, Professor Neil Budworth and the Strategic Scientific Technical Lead, Julie Turner were both awarded the University Medal in recognition of their efforts during the Covid pandemic.

The Occupational Health Manager, Sarah Van Zoelen was awarded the prestigious title of Queen's Nurse (QN) by community nursing charity The Queen's Nursing Institute (QNI).

## **Progress on the Objectives set for the 2022/23 Academic year**

There has also been good progress on a broader front throughout the 2022/23 academic year

2023 saw a full return to a more normal academic year and this is reflected in the incident and accident figures for the year as activities resumed.

There was a significant increase in reported incidents and near misses during the year which was largely related do with the transfer of the Athletic Union activities from Loughborough Students' Union to Loughborough Sports.



## Occupational Health and Wellbeing

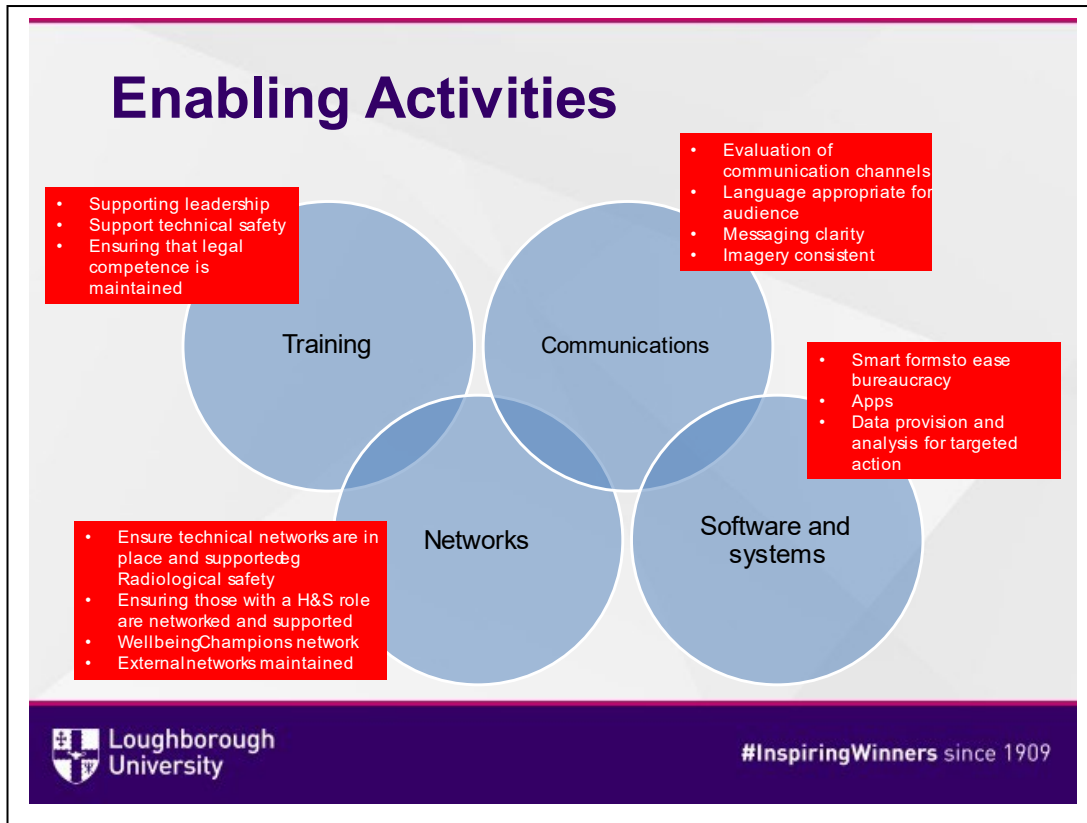
The Occupational Health software system has now been fully installed and is operating well. Data protection has been improved as reports no longer have to be E mailed to managers, diary management has been improved and we are now starting to see the benefits of the system in terms of accessible data. The Occupational Health and Wellbeing team have been incredibly busy during the 2022/23 academic year and beyond, delivering more than 1,000 appointments and over 550 vaccinations. Fast track physiotherapy is now in place for those with musculoskeletal issues and mental health support is also available for those who need it. In addition, a full programme of wellbeing events, both physical and on line has been delivered. The 2022/23 academic year saw the first academic school wellbeing survey which resulted in a school led action plan. The data from this exercise also allowed targeted interventions and the introduction of 1:1 health MoTs. Further detail is included in a specific section below.

### Broader progress

Some other notable highlights included the specification and purchasing of a permit to work system; the recruitment of a Lead Chaplain; campus wide audits on water management, manual handling and Human Tissue Act compliance. A more detailed discussion of progress is included later in this report

## Priorities for 2023 and beyond

The areas of work for 2023 and beyond is broken into three parts :- Enabling activities, University level and overarching activities and individual work streams.



## Enabling Activity

A strong foundation is critical to good health, safety and wellbeing management. The enabling activities described here underpin the Health, Safety and Wellbeing plan.

The key enabling activities relate to training, communication, networks and software and systems.

In terms of training, this is specifically ensuring that leaders are aware of their responsibilities and have the skills and knowledge to discharge their responsibilities, that the skills and knowledge are in place such that technical risks can be well managed.

Good communications form the back bone of safety management. The Health, Safety and Wellbeing team will review the impact and effectiveness of different communication channels, we will review the language used, that messages are clear and that the imagery used is clear and helpful.

Relevant networks are also an important way in which the Health, Safety and Wellbeing team interacts with Schools and departments. These networks can be special interest groups relating to particular risks, embedded safety staff, or those who hold particular safety related roles eg Wellbeing Champion or Fire Warden. The Health Safety and Wellbeing team will work to ensure that these networks are up to date and that their competence is enhanced through support and training.

The final enabling element relates to process and technology. The pandemic has taught us that in some circumstances the careful use of software and apps can help to support end users. Where appropriate, and after ensuring that the relevant process is efficient and effective we will consider where such technologies can be helpful and deploy them.

### **Overarching Activity**

As well as the enabling activity, there are some programmes of work that have an impact across the University as a whole.

It is fundamental that senior leaders are aware, and understand, the risks for which they are responsible. Over the next two years the process for the development and maintenance of the Health and Safety risk register will be reviewed with a view to simplifying and streamlining the process. Alongside this HSE committees in Schools and Professional Services will be encouraged and supported to review the risk register in their regular health and safety committee meetings.

The safety structure and demands of policy can either enhance and support good leadership behaviour or can undermine it. The detail of each policy will be considered to ensure that it aligns with and supports effective safety leadership behaviour.

The identification of safety related training needs and the sourcing and delivery of appropriate courses remains an important activity. The training encompasses legally defined mandatory training through technical competence to internationally accredited courses. Where appropriate, and whether the level of risk allows it we have sought to minimise cost through the use of on line solutions.

We will also seek to improve our data architecture and reporting so that we are able to provide high quality information on a routine basis to leadership teams and HSE committees. The data will also be used to inform and target the activities of the Health, Safety and Wellbeing Team.

Where significant incidents occur, or high potential near misses happen, Incident Review Panels will be formed to ensure that the root causes of the event are identified, and lessons are learned and disseminated.

Below the overarching activities sit a number of more specific plans.



## Wellbeing

Wellbeing is core to the new University strategy. The Loughborough University wellbeing framework forms the basis for identifying areas of need and the development of localised wellbeing plans and will be progressively rolled out across the University. This roll out will be supported through a network of wellbeing champions. At a University level, based on the findings of the wellbeing assessment, a series of presentations

Nationally mental health continues to be a topic of growing concern. We will continue to develop a wellbeing and stress measurement tool so that preventative and protective measures can be developed and delivered in a targeted way.

We will continue to develop programmes and support processes based around good clinical practice and lifestyle medicine. We will seek to identify best practice and in 2023/24 investigate the evidence for, and practice of, social prescribing.

## Occupational Health

The core Occupational Health function will continue to develop based on the strong foundations which have been built over recent years. In particular in 2023/24 the aim is to have even greater presence and visibility at all levels on campus and ensure the delivery of the Health and Wellbeing framework across both campuses.

Health surveillance will be a particular focus in 2023/24 with a full review of the process to ensure compliance.

The OH team will continue to seek and develop best practice in both Occupational Health and wellbeing.

There will be continued collaboration with the University Health and Safety team to ensure continued compliance with legislation for health surveillance requirements.

## **Key Risks - Supporting Professional Services**

Data continues to show that the Estates and Facilities Management Service suffers the highest rate of incidents. This is unsurprising given the number of colleagues in the function and the physical nature of the work.

However, the Health and Safety Service will continue to work with the leadership teams to further develop department specific road maps. These roadmaps identify key actions, activities and work programmes. Monitoring data is integrated into Roadmap reporting.

In addition programmes of work will be delivered around key risks. For example the full introduction of the electronic permit to work system and a full review of the way in which noise is managed.

## **Compliance**

In a large and complex estate ensuring continued legal compliance is a challenging task. Work will continue to ensure that competence, delivery and monitoring structures are in place to ensure continued compliance.

In particular the 3 key risks of fire, legionella and asbestos will be closely monitored.

## **Radiological Chemical and Biological**

Specific compliance key performance indicators are maintained in relation to the 'scientific' risk areas of radiological, chemical and biological compliance. The processes and structures needed to maintain these indicators will be subject to continuous review to ensure that they remain accurate and relevant.

The decommissioning of the Graham Oldham building is now complete and it has now been demolished as has F building (the old Chemistry building).

## **Fire**

There continues to be a focus of fire safety. Avoiding problems in the future is rooted in making good decisions now, so work continues to improve design choices as buildings change and in improving the passive protection in the existing building stock where ever possible.

As such training on, and the further development of, the fire design strategy continues to be an important strand of work.

In addition monitoring and auditing will continue and the fire team will be proactive in the monitoring of projects to improve compartmentalisation and to ensure the integrity of fire doors.

## **Further Detail on 2022/23 progress**

### **Broad progress**

Health and Safety Roadmaps have been developed in collaboration with Catering and Domestic Services and Estates and Facilities Management. These set out the direction, programme of work and metrics and are proving to be effective.

During 2022/23 efforts were made to simplify the fieldwork risk assessment approach through the use of smart forms. Despite some significant technical challenges, a smart form was developed and is being tested in a pilot department prior to a wider scale launch in 2024.

Significant progress was also made in terms of the assurance processes relating to the Human Tissue Act. The University has hundreds of thousands of blood and plasma samples which require absolute traceability. Smarter systems, more reliable labelling and additional auditing and training have given great assurance of legal compliance.

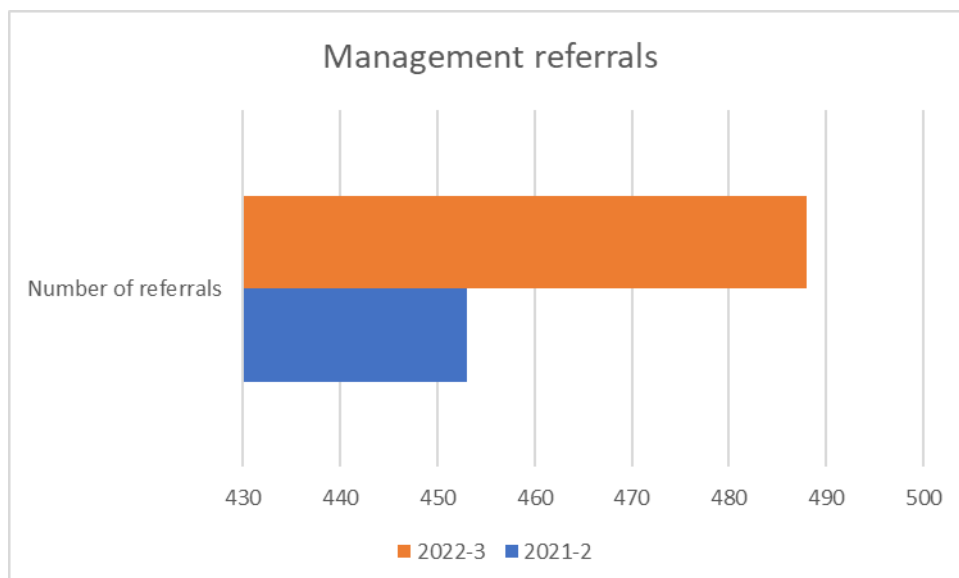
## Occupational Health Highlights of 2022-2023

- Implementation of the OPAS-G2 software to manage all confidential medical information, appointments, recalls and reporting.
- Completion of the wellbeing needs assessment report and recommendations to the Business School
- Delivery of two wellbeing champion events.
- Ongoing delivery of wellbeing events tailored to specific employee groups.
- Greater collaboration with colleagues in HR and H&S

### Sickness absence management

Occupational Health specific software was launched in January 2023, this has provided a much greater confidence with compliance to data protection (GDPR). Reports containing personal medical information, are no longer emailed to managers. Managers and HR now have access to a specific portal account to view relevant reports.

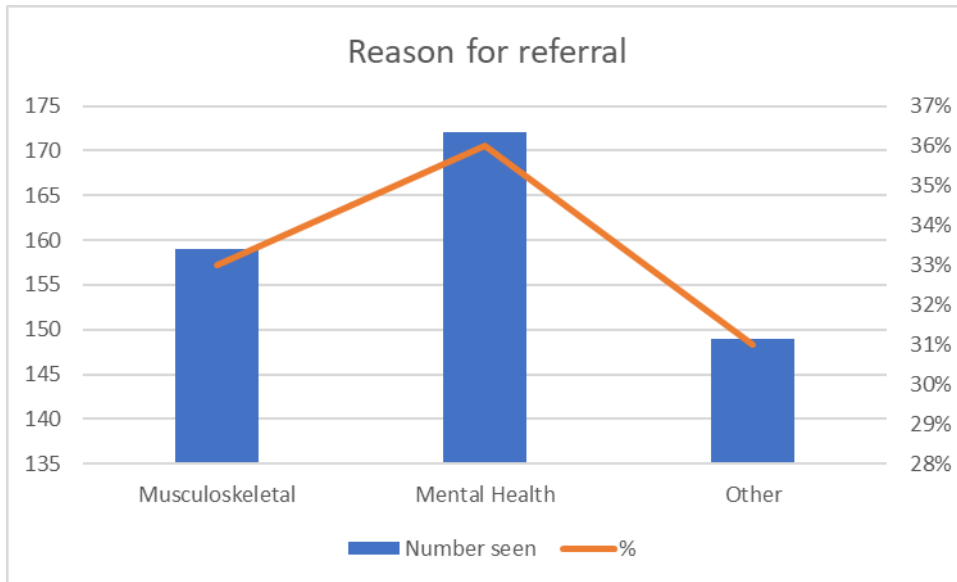
The numbers of referrals into Occupational Health continue to grow:



The Office for National Statistics has reported that minor illnesses were the most common reason given for sickness absence nationally in 2022, accounting for 29.3% of occurrences of sickness absence. This was followed by "other" conditions at 23.8%, musculoskeletal problems at 10.5%, respiratory conditions at 8.3% and mental health conditions at 7.9%.



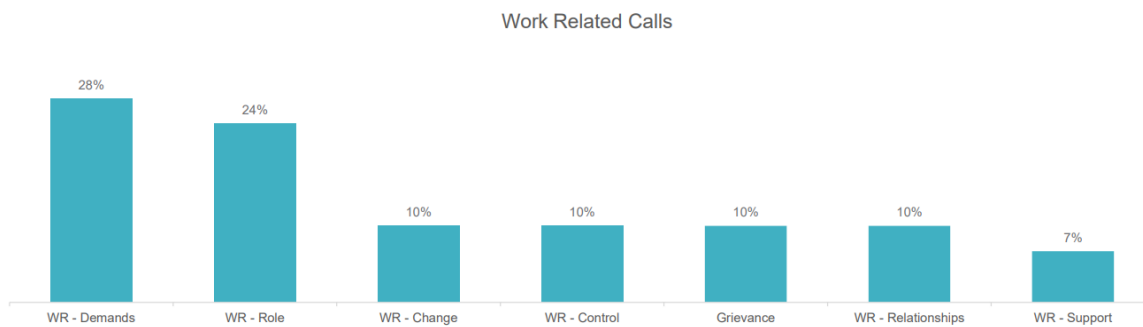
At Loughborough University – reasons for management referrals into the Occupational Health service, show a slightly different picture where there has been a consistent split between mental health, musculoskeletal and ‘other’ as reasons for absence. This is because management referrals are most likely to occur for more serious or long term issues, which tend to be dominated by musculoskeletal problems and mental health concerns.



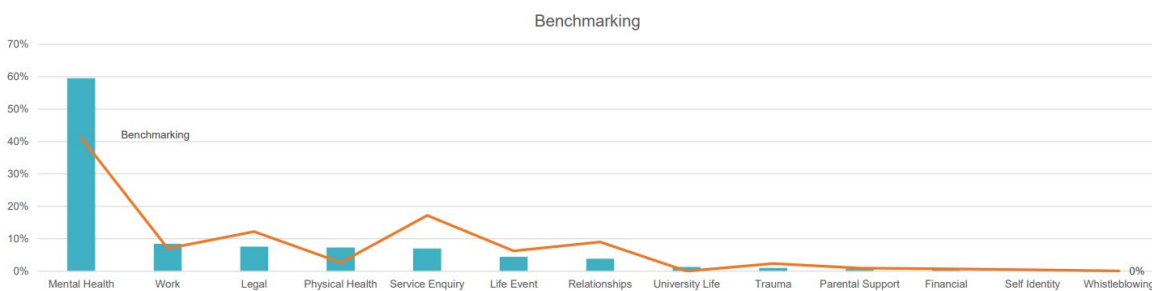
## Mental Health

**Employee Assistance programme.** In the last 12 months the Employee Assistance programme – Health Assured – received 346 calls into the service. 324 of these were counselling calls. Anxiety was the most common reason, accounting for 39.2% of overall counselling engagement. This was followed by Low Mood 8.6% and Depression 7.7%. Data recorded at the start and end of therapy has shown the positive impact that the service is having on employees. At the start of therapy 40.0% of employees were out of work, after engaging in therapy this reduced to 25.0% with 38.0% of employees returning to work.

Of those calls relating specifically to workplace demands the data is as follows:



As an organisation, Loughborough University is sitting well above the national benchmark for mental health calls:



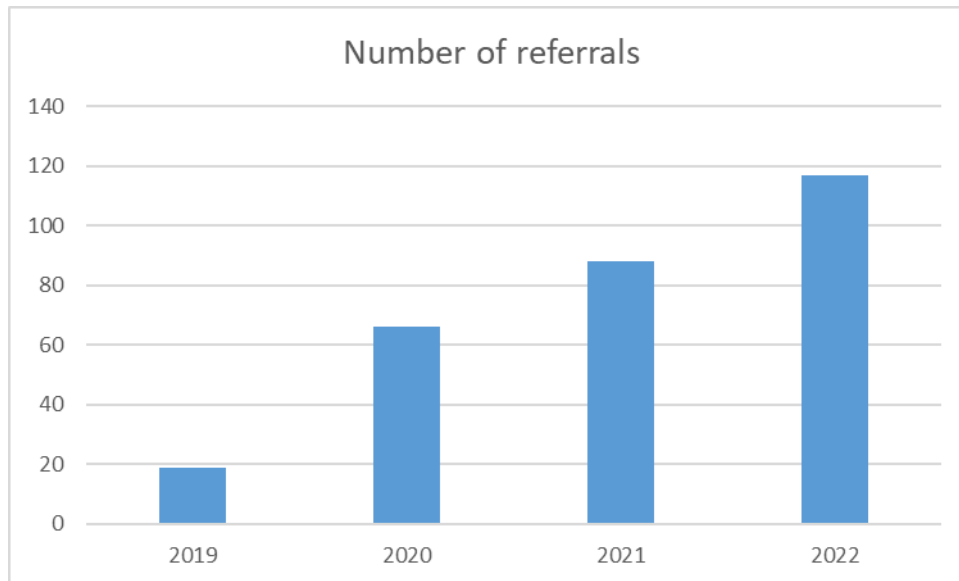
4% of calls were extended to supporting family members.

In July 2023 following discussion with student services, the decision was made to no longer offer the student services counselling route for employees. The EAP provides Solution Focused Short Term Therapy and employees can be matched with counsellors who have similar lived experience. Mental Health conditions requiring longer term therapy need to be supported by GP services and appropriate onwards referral for specialist support should be offered. Therefore, if an employee contacts the EAP seeking support with a specific mental health disorder such as an eating disorder or PTSD, or schizophrenia, it is likely that they will be offered the 24/7 helpline, but referred to the GP for structured counselling support as this is more clinically appropriate.

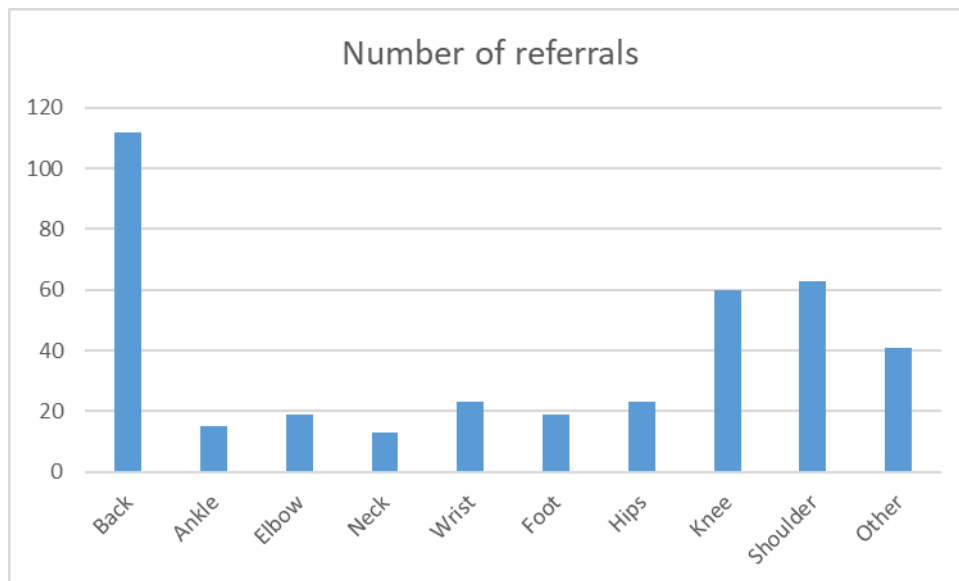
**Access to Work Mental Health Service (previously Remploy).** The Access to Work Mental Health Support Service, delivered on behalf of the Department for Work and Pensions, provides nine months of tailored mental health support to employees who are experiencing depression, anxiety or stress to help them stay in, or return to, the workplace, at no cost to the individual or employer. Monthly clinics are offered to our employees in order for them to seek support.

## Musculoskeletal health

Referrals to the onsite physiotherapy service continue to grow year on year:



With back pain continuing to be the main reason for referral:



Data from the referrals has shown that employees from Estates and Facilities Management account for 43% of all referrals into the service. Challenges such as an aging workforce, and more long term/chronic conditions in combination with a physical role were behind many of the referrals. In order to proactively address these concerns, the physiotherapy team have enhanced the support given offered to include the delivery of several proactive educational sessions. We have hosted two musculoskeletal physiotherapy education sessions to E&FM conducted by a physiotherapist to cover the most common referral conditions of back pain and arthritis management.

## Wellbeing

**A health and wellbeing audit** by Price Waterhouse Coopers indicated that we were sector leading in the provision of health and wellbeing initiatives to our staff 'Taking the Wellbeing Framework, supporting initiatives, the governance structure, and the dedicated post of Director for 'Health, Safety and Wellbeing' into account, in comparison to what we see in the wider Higher Education sector, the University's practices are well developed in this area.'

**School specific needs assessment** for wellbeing was completed for the Business School. The needs assessment is a combined approach incorporating the Health and Safety Executive stress indicator tool and Public Health England's wellbeing assessment. The data from the assessment has allowed for targeted intervention to be identified to support the school. One of the requests from employees was that the University offered health MOT's for staff. As a result, we have partnered with Leicestershire County Council who are delivering onsite sessions with referral routes into local organisations. This process is being initially piloted with E&FM staff although uptake has been patchy.

**Webinars** – we continue to collaborate with Superwellness who host bi-monthly webinars which are available to all staff across campus. These have been well attended with the most recent one on migraines and headaches, having the best feedback scores. Superwellness also provide our wellbeing champions with monthly resources to display in their work areas, covering a wide range of wellbeing topics.

**Nuffield Health Consultant wellbeing days** – we have hosted four wellbeing days in collaboration with Nuffield health. These have been open to all staff at Loughborough and have covered the following topics: menopause, Men's Health, Skin and Sun health and Breast Care.

**Musculoskeletal sessions**- our onsite physiotherapy service has hosted several musculoskeletal days aimed predominantly at the estates and facilities teams due to the level of manual labour in their roles and the increased number of referrals into the physiotherapy service. More drop in sessions are planned for 2023 and we are looking to widen the proactive support given to more office based staff to reduce injuries that occur from static postures.

**Wellbeing champion days** – there are approximately 50 wellbeing champions currently in post. This year we have hosted two wellbeing days aimed at supporting them in their roles. Topics covered included managing difficult conversations, mental health and resilience and how to embed a wellbeing culture by design.

**DSE (Display Screen Equipment) assessor process**- Occupational Health have supported Health and Safety in creating a clear process for DSE assessor and onwards referral for support.

**Marketing** – Our marketing team are now producing monthly blogs which are advertised in the monthly notifications email, which promote differing areas of wellbeing.

**Flu vaccines**- as with previous years 500 flu vaccines were provided to the employees of Loughborough University. For ease, the Loughborough London campus were issued flu vouchers for Boots which covered the cost and gave staff greater scope for accessing vaccination.

### **Health surveillance**

Health surveillance is a scheme of repeated health checks which are used to identify ill health caused by work. With the introduction of the Occupational Health software, managers are now directly informed of any employees who do not attend for surveillance appointments. There has been concern raised by both the employees and the unions around the requirement to attend for health surveillance appointments and by working collaboratively with HR, the need for these checks was explained and the contractual provisions requiring attendance outlined. Although the current provision in employment contracts is clear, further clarity has been added for new starters.

In 2021 the HSE made changes to Guidance contained in L108 for the Control of Noise at Work Regulations 2005. This included changes to the advice provided to health Professionals - *where, as a result of health surveillance, the employee has identifiable hearing loss, the diagnosis of Noise induced hearing loss (NIHL) must be confirmed by a doctor (unless the competent adviser is a doctor). Fitness for work advice should then be provided by the competent adviser.* The requirement for referral to a doctor, associated with re-categorisation, is a key change which creates a significant challenge. Anecdotally, this is producing an increase of over 300% in referrals to OH physicians, which has overwhelmed an already limited resource.

Meetings are being held across campus with school and professional services health and safety officers, to explore the appropriateness of health surveillance requests. At the end of the year, managers will be issued a report outlining the compliance of health surveillance for their areas.

### **2023-2024 priorities and timelines**

Health surveillance – work is continuing to improve processes and enhance compliance.

The delivery of wellbeing needs assessment to schools in order to identify workplace needs.

The provision and evaluation wellbeing offerings to ensure they are fit for purpose – using surveys, feedback forms, departmental utilisation metrics and risk assessments.

Continued liaison with managers and team leaders to raise the profile and understanding of health surveillance and in particular the role of the manager.

## **Health and Safety Training 2022/23**

Health, Safety and Wellbeing Services arranged 140 training events, delivered to 1043 members of staff, totalling 7,124 learning hours.

These figures show a growth on training delivered last year with 27 more courses arranged, 67 more staff trained and 1,028 more hours spent learning.

During the same period, 7,354 people either completed online learning, personal learning or attended a toolbox talk. This shows an increase of 53%, 2,556 learning interventions, from the same period last year.

Training courses delivered throughout the year were:

Abrasive Wheels

Asbestos Awareness (including non-licensed works)

Auditor Training

Banksman Reversing Training

Biological Safety Awareness

Biological Safety for Lab Users

CAT and Genny Training

Climb Trees and Aerial Rescue

Confined Space Entry and Escape Breathing Apparatus

Control of Substances Hazardous to Health – Spill Management

Control of Substances Hazardous to Health – COSHH Awareness  
DSE Assessors Forum  
Finance Procurement training for technicians  
Fire Extinguisher User  
First Aid (Beginner, Requalification and Emergency)  
Health and Wellbeing Training for Senior Leaders  
Human Tissue Act  
HVAC Wet and Air Systems Applications  
Introduction to Unmanned Aircraft Systems Regulations  
Ionising Radiation Legislation and Protection  
IOSH Managing Safely  
IOSH Working Safely  
Irrigation Technician Training  
Ladder Inspections  
Laser Safety Awareness  
Latchways Personal Rescue  
Level 2 Food Hygiene  
Level 3 Food Hygiene  
Managing Working at Height  
NEBOSH General Certificate  
Portable Fire Extinguisher Recharging and Maintenance  
Safety Stand Down – Protecting Respiratory Health in Construction  
Scaffold Training  
Towing Training  
Unvented Hot Water  
Vertical Lift Training  
Woodwork Machinery Operator Training

## Non-attendance

Cancellation on training with less than 24 hours-notice decreased with 53 cancellations received compared to the last reporting period of 66.

The rate of non-attendance has increased to 9% (91 non-attendees) an increase of 4% on last year.

151 cancellations were received with more than 24 hours-notice, a slight reduction on the previous year by 7. Reasons for cancelling can be categorised as follows:

21 - Error in booking

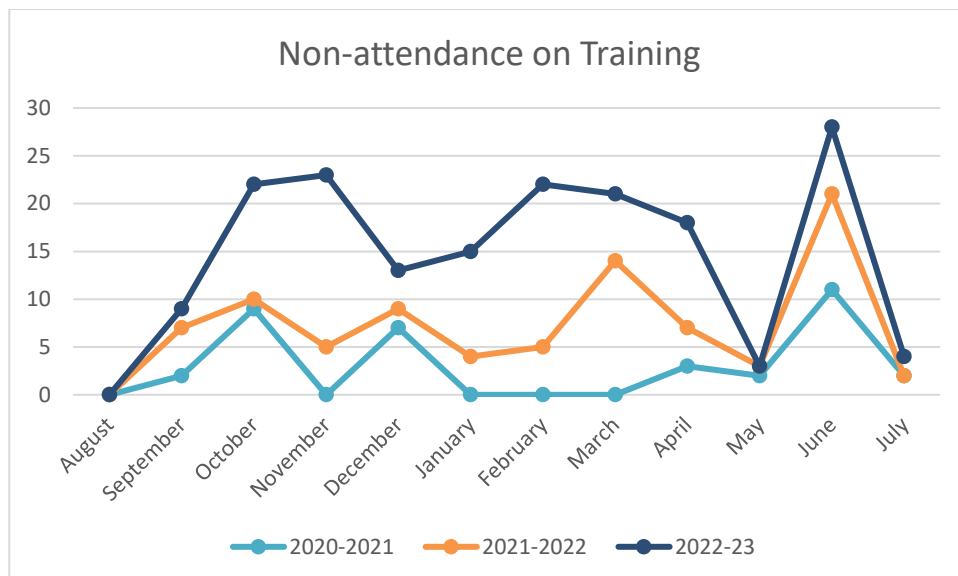
16 - Illness

35 - No longer appropriate

36 - Personal commitments

1 - Transport difficulties

42 - Work commitments





## **2022 to 2023 Overview**

There are ongoing challenges with the learning management system and the Health and Safety Service is working closely with HR and IT Services to seek to resolve these issues.

As a result of this issue, a master training spreadsheet has been created to monitor training attendance; although this system does not give us the reporting data we require, it does provide accurate attendance information. The spreadsheet can be filtered by department and course, includes conditional formatting to highlight imminent renewal dates and macros to show courses relevant to selected departments. It is hoped to share this spreadsheet with all line managers within E&FM, on a read only basis, to put more onus on managers, to manage the training in their areas.

To assist in maintaining optimum attendance on training, to reduce the rate of non-attendance within E&FM and, to keep the master training spreadsheet up-to-date, training has been undertaken by the Health and Safety administration team to enable them to run reports from iTrent. A three weekly training report is sent on a weekly basis to all managers within E&FM highlighting forthcoming bookings and a further report indicates online training completed. At present, there remains a manual update to the master spreadsheet and further exploration will be made into automating this process.

The Health and Safety website was relaunched during the year which has allowed for improved training information and deep links to courses to be added. The review of the website also included a review and update of the staff training matrix to include training to be undertaken by Safety Officers.

A successful DSE (Display Screen Equipment) Assessors Forum was held in May 2023 whereby University assessors were provided with training on face-to-face assessments, use of the PACE Management System and practical help and support from Domestic Services (specialist furniture) and Occupational Health. In addition, a Laser Safety Forum was held in July 2023 which attracted over 67 participants from universities across the UK.

As a result of the DSE forum, a DSE Assessors Teams Channel was established to enable better communication with assessors and for general questions to be posted and responses shared.

There are multi factor authentication issues with the use of PACE (DSE administration system). In the short-term assessors will be asked to change their password to a pass-phrase whilst Cardinus develop the improvements the University require.

To aid communication with our First Aiders, a termly newsletter was established with two newsletters sent out to-date. The newsletters have been well received with numerous suggestions received for future issues. First Aid lanyards have been issued to all First Aiders to make them more identifiable in the workplace.

The management of training was handed over to the Training Administrator who now takes day-to-day responsibility for the running of all E&FM and Healthy and Safety training. This is a massive undertaking and there will be a period of adjustment during the transition phase.

Figures provided by Organisational Development show that the completion of Health and Safety Inductions and Fire Safety Awareness training has improved as follows:

	Completion Within 1 Month		Completion Within 6 Months		Completion by 31/07/23
Health & Safety Induction	76%	↑9	91%	↑2	96%
Fire Safety	63%	↑9	85%	↑4	93%

## 2023 to 2024 Programme

Planning E&FM training has proved challenging. An additional challenge has been the amount of training requested outside of the PDR process.

The physical move of the Facilities team has resulted in a lack of training space. Alternative venues are being sought for the 2023/24 academic year.

A pricing agreement has been reached with iHASCO for the delivery of online learning over the next three years.

A new supplier has been secured for a number of Health and Safety and E&FM courses such as working at height. This change has been made as a result of the previous trainer did not maintain their PASMA accreditation.

In 2023/23 a Health and Safety refresher training will be launched on line during the year. The package will be launched in partnership with Organisational Development and a number of web pages; management advice and systems will require simultaneous updates to reflect the changes.

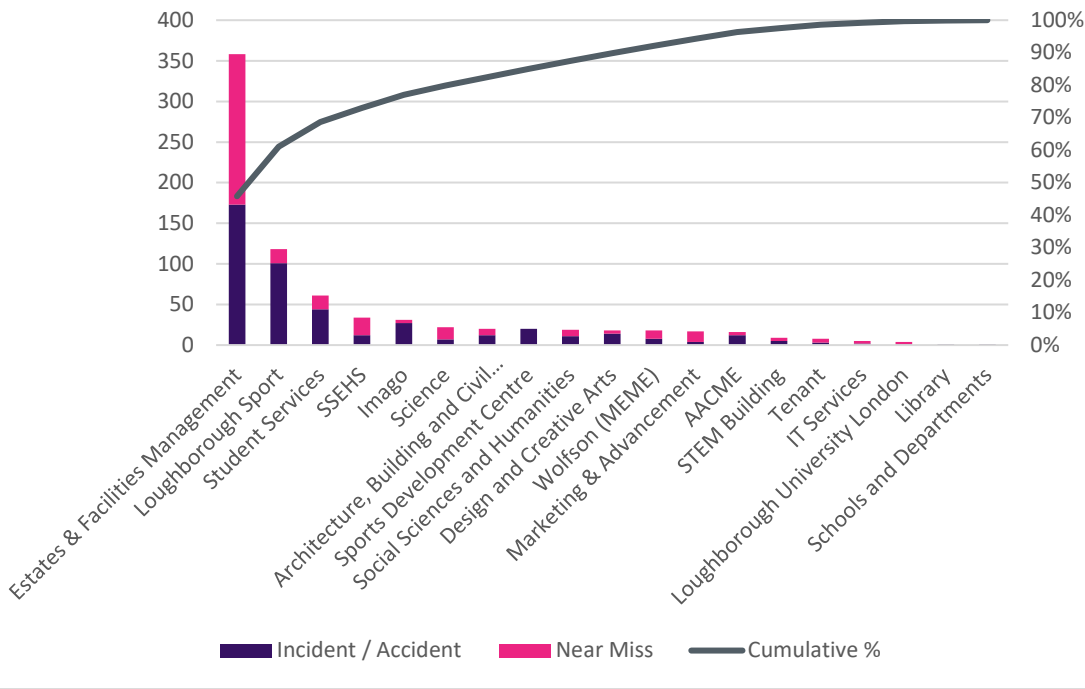
Finally, a review of physical manual handling training will be undertaken to ensure that all areas of the University are receiving the appropriate training and advice.

The University has also been active in business continuity planning. Meetings are held to ensure that plans are in place for the reasonable worst case scenarios and desk top exercises have been conducted on how the University would cope with power loss, cyber attack and ransom ware attack.

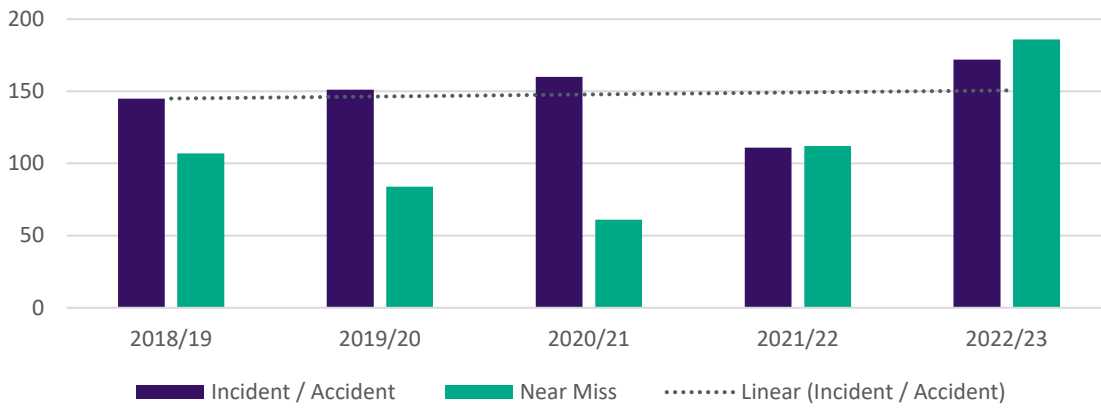
## **Incident Data**

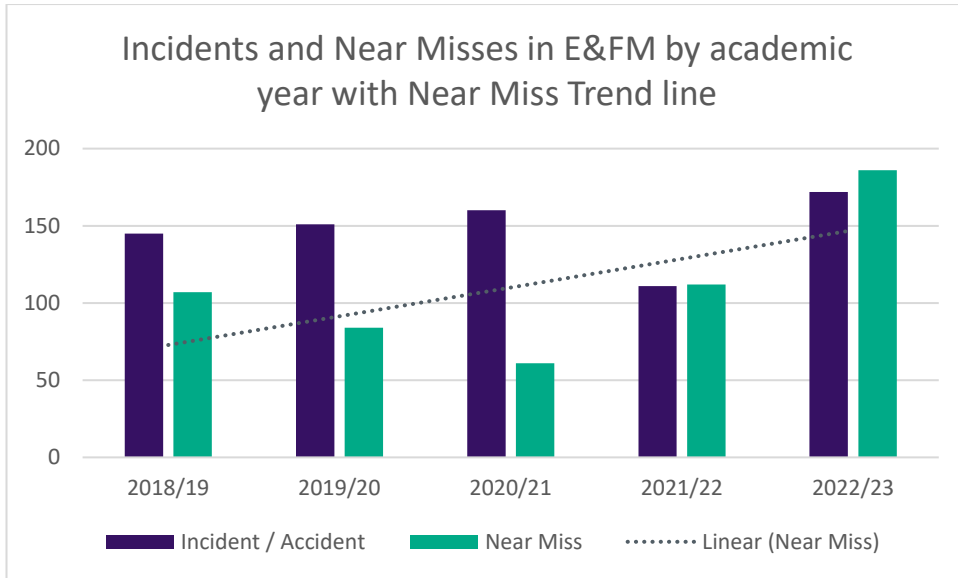
Excluding fire alarms there were 775 reported accidents and near misses in the 2022/23 academic year. This is an increase in reported incidents from 618 reported incidents and near misses in the 2021/22 academic year. 43% of those incidents and near misses were reported with Estates and Facilities Management (E&FM) as the organisational unit responsible. Within E&FM over half (51%) of reported incidents came from Catering, Domestic & Residential Services.

### Pareto analysis to show incidents and near misses by Org Unit August 2022 - July 2023

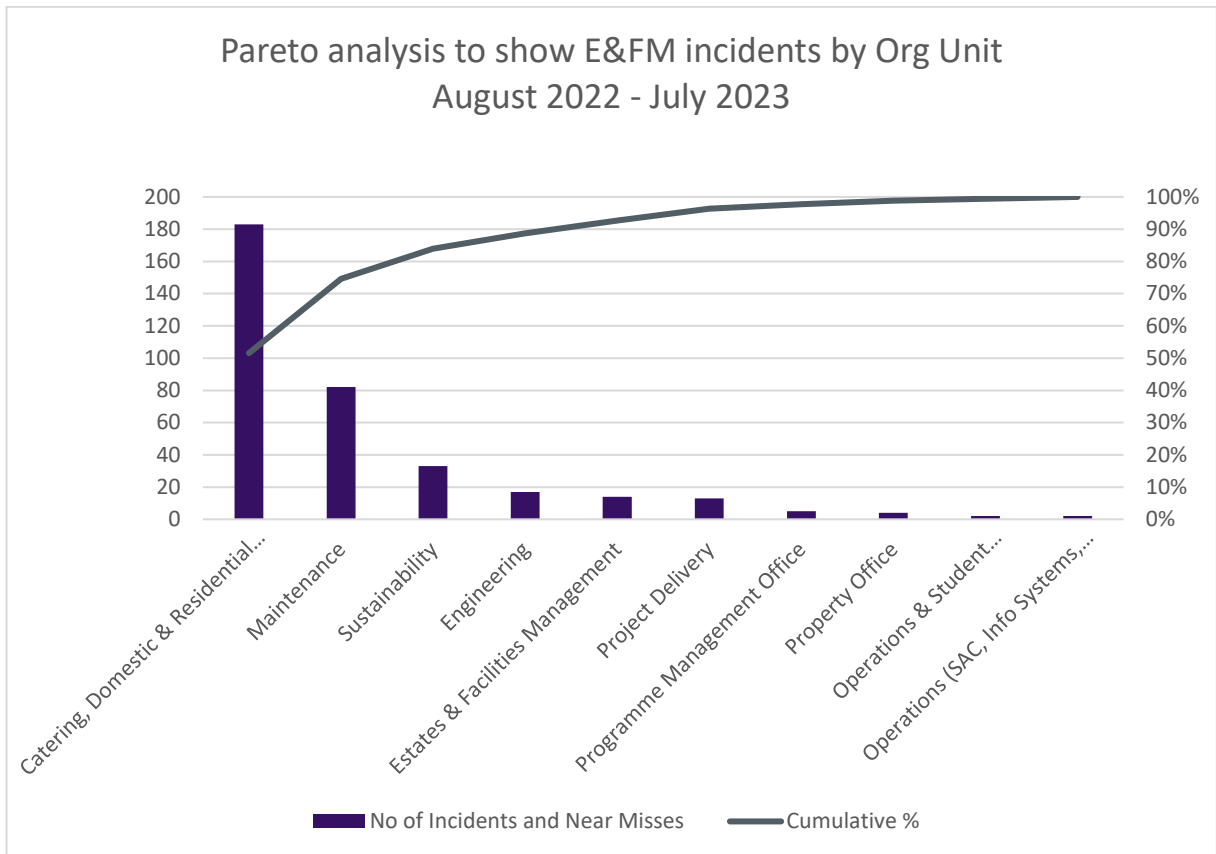


### Incidents and Near Misses in E&FM by academic year with Incident Trend line

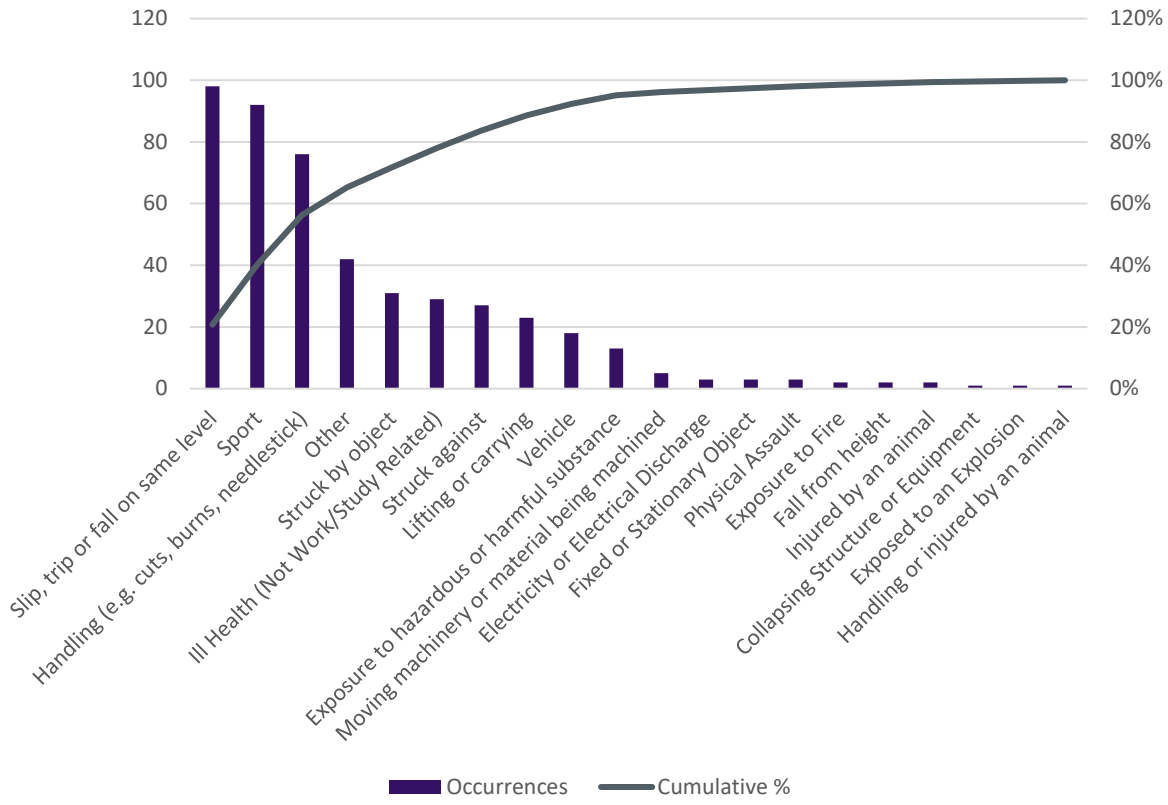




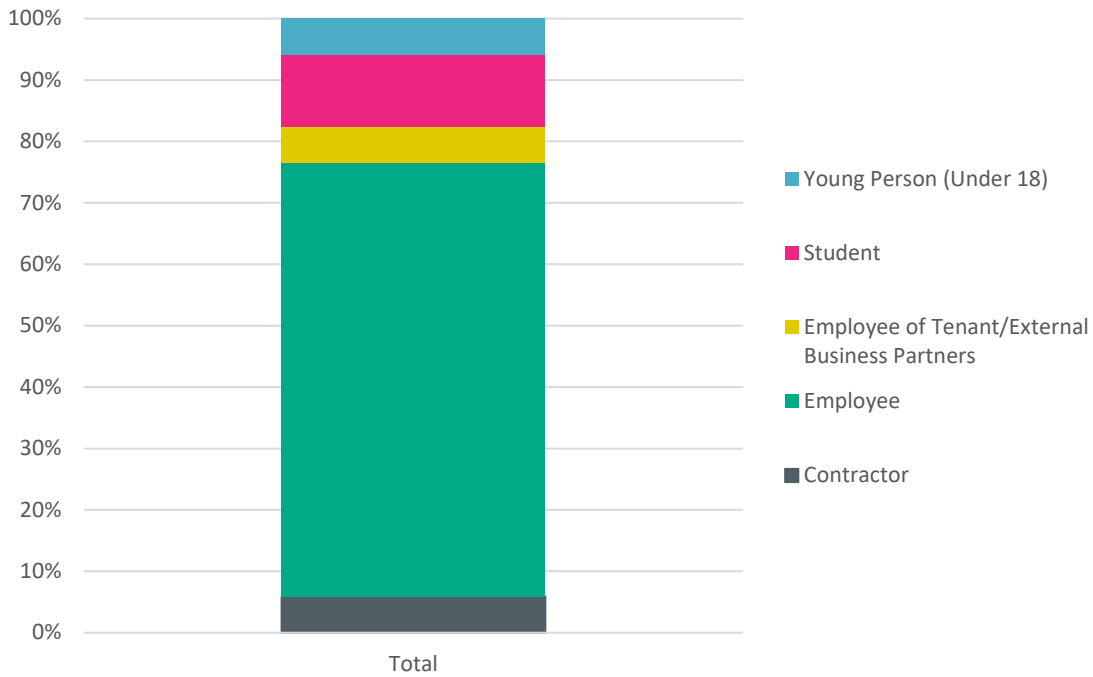
The Near Miss reporting trend line suggests an improving culture of Near Miss Reporting. A possible explanation for this is the work done to improve the Evotix reporting tool and the ability to access the form on mobile devices.



### Pareto Analysis of Incidents/Accidents, August 2022 - July 2023



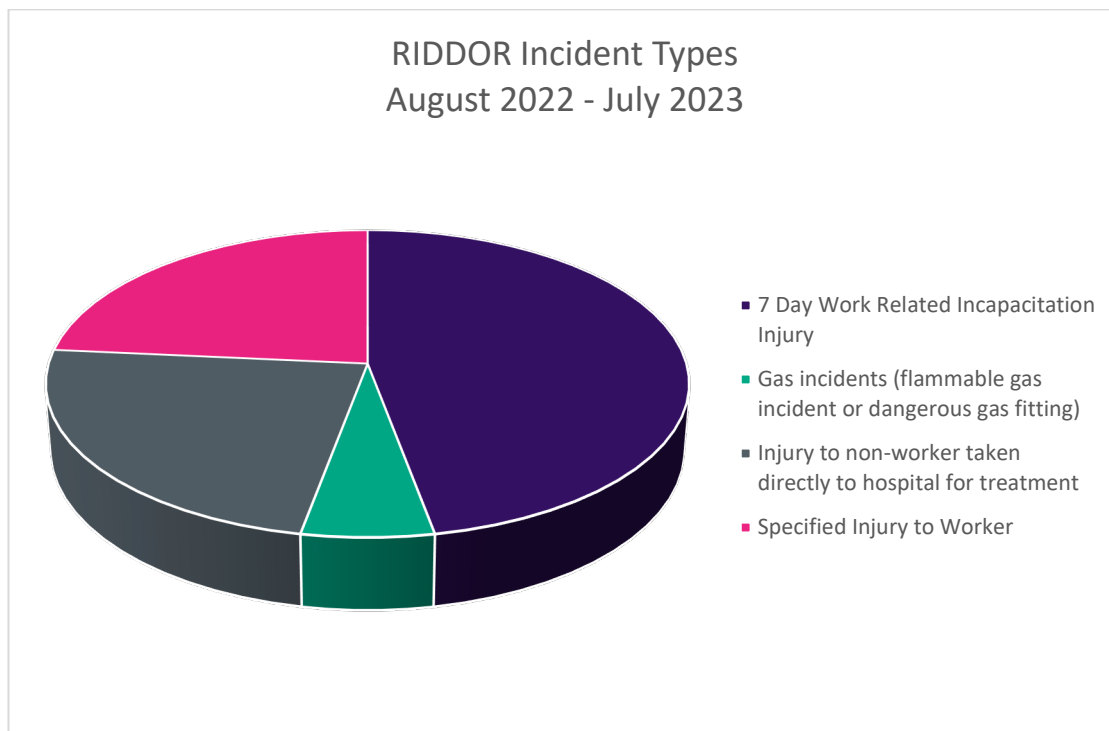
### RIDDOR Incidents by Person Type



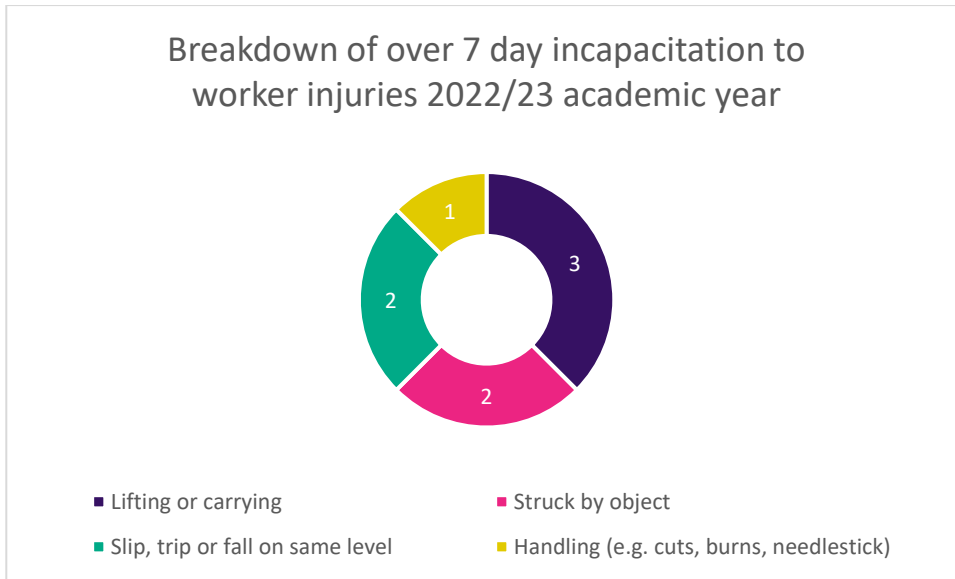
There were 17 incidents which met one of the criteria listed in the Reporting of Incidents Diseases and Dangerous Occurrences Regulations (RIDDOR) and hence were reported to the Health and Safety Executive.

This compared to 11 in 2021/22. 12 of these involved a member of staff and 2 involved Loughborough University students (the others being contractors, tenants and visitors).

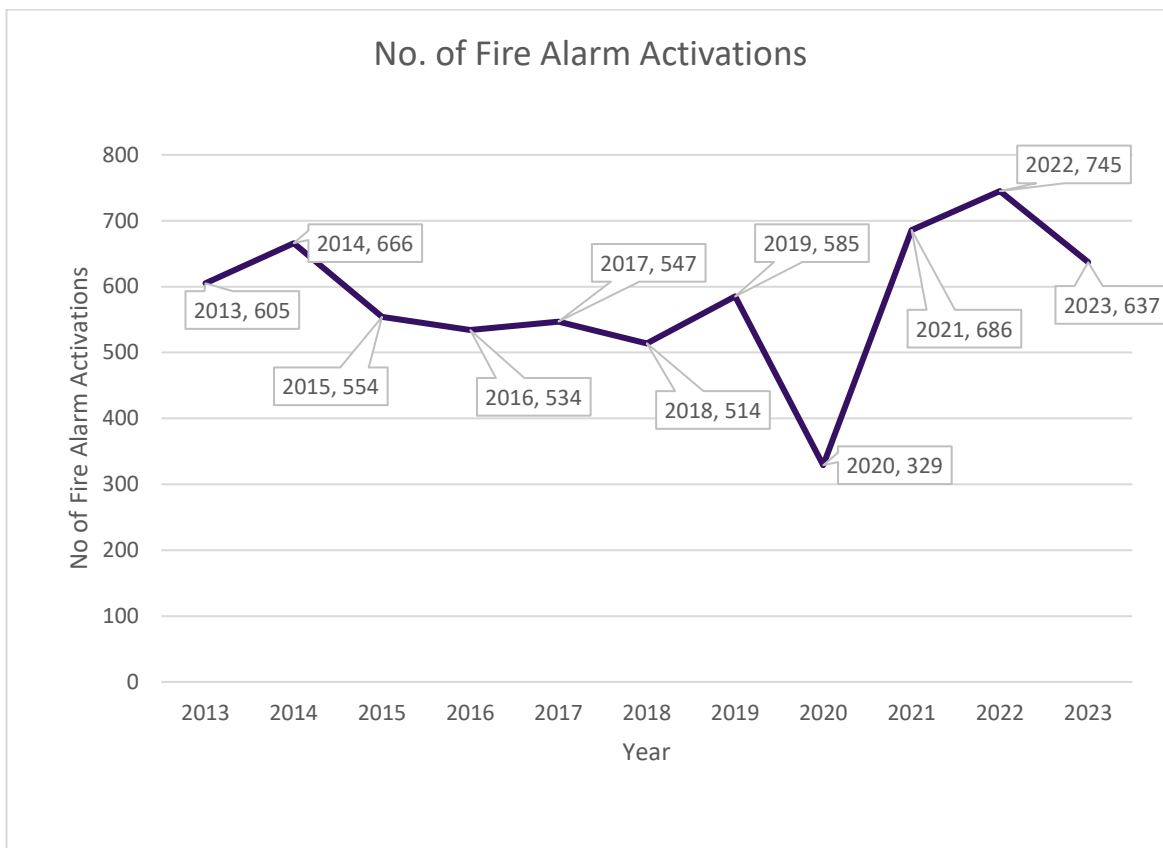
There was one gas incident reported, four specified injuries, four injuries to non-workers taken directly to hospital, and 8 seven day work related incapacitation injuries.



The breakdown of causes of the incapacitation injuries is as per the below:



### Fire Alarm Data

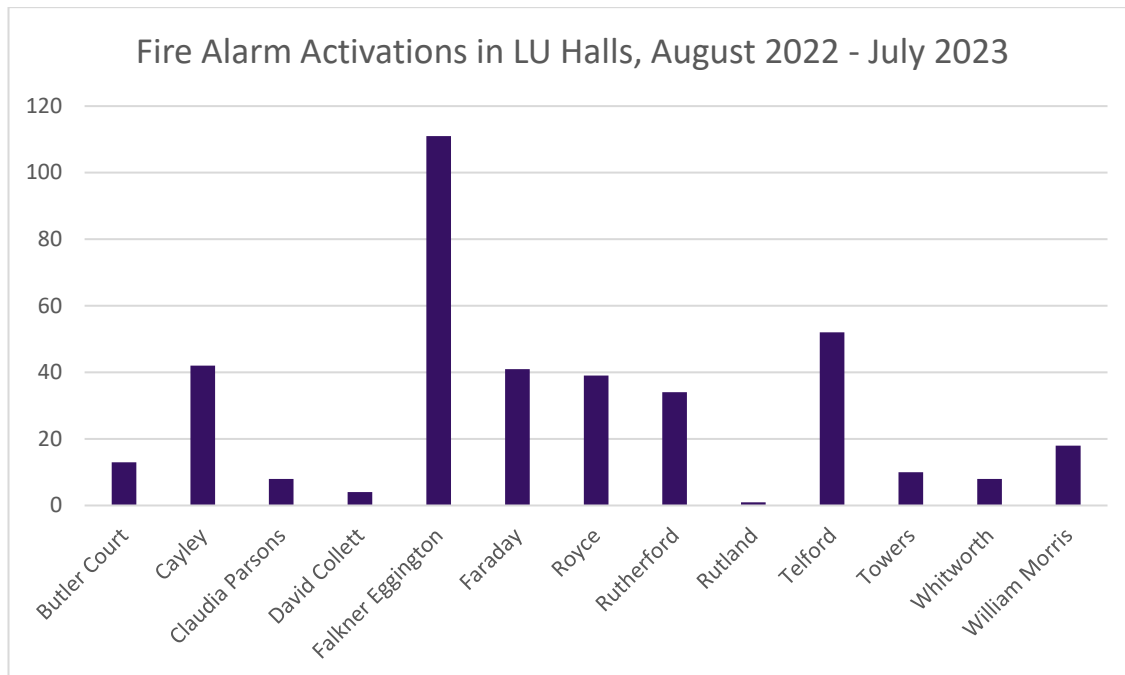


2023 saw a reduction in Fire Alarm activations. This reduction of 108 fire alarm activations correlates to a reduction in Hall alarms of 103 activations (from 504 in 2022 to 401 in 2023).

Explanations for this could be the improved Hall induction training delivered by the Health and Safety Service Fire Team.



This theory is supported by a reduction in alarm activations in the first six weeks of reoccupation of 22%.



## Health, Safety and Environment Committee



### **Future Business**

Origin: Secretary

#### **Action Required:**

To CONSIDER key business for future meetings and NOTE business for earlier meetings.

### **Executive Summary**

Paper proposes key business items for meetings scheduled from May 2024 to February 2025 and notes business that has been considered at earlier meetings.

## **Future Business**

### **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 (if agreed)

Marketing and Advancement

HSE RAG Rating

H&S Strategic Long-term Plan

Occupational Health and Wellbeing Annual Report

### **Feb 2025 Meeting**

HSE Update from Student Services

HSE Update from Estates and Facilities Management

## **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 / Accommod 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

Occupational Health and Wellbeing Annual Report

### **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

Occupational Health and Wellbeing Annual Report

## Climate, Environmental & Sustainability Risk

Origin: Elliott Brown, Acting Sustainability Manager

### Action Required:

To **DISCUSS** how to incorporate a Sustainability (Climate Change and Net Zero) Risk Register at strategic and operational levels.

- 1) How does/can this fit into main university risk registers?
- 2) Are risk associated with health and safety risks from extreme weather events already incorporated into other risk registers?

### Executive Summary

LU needs to be aware of the risks associated with climate change and the potential impacts on infrastructure and operations at our campuses. We can already see the effects of extreme weather and climate change at LU, and these events are projected to increase under the Intergovernmental Panel on Climate Change (IPCC) scenarios. Based on these projections, the highest risk to our university will likely come from extreme rainfall and heat events, which are expected to increase in intensity, duration, and frequency. It is important to note that many buildings on our campus lack adequate cooling systems, which increases the risk of heat stress for occupants, as well as reduced productivity and service outages.

We have already experienced the impact of these climate changes on core university operations, such as the summer graduation in 2022, where temperatures exceeded 40°C. It is evident that extreme weather events will significantly impact health and safety, productivity, and day-to-day activities like travelling to campus or attending sporting events.

The following paper provides an overview of the initial assessment of key risks that need to be evaluated and mitigated. This list is not exhaustive, and it is expected to grow as the University Sustainability Strategy is developed and the risk register is updated.

## **Other Committees Consulted**

Sustainability Sub Committee – Action from this committee to develop an Environmental Sustainability Risk Register

## **Equality Diversity and Inclusion Considerations**

No EDI impact with development of risk register. As actions to mitigate risks are developed, EDI impacts will be considered throughout the development of these.

## **Paper Details**

The initial key risks for sustainability and climate change are detailed in the table on the following pages. Additionally, it is important to note that there may be other risks not mentioned in the table. As the University Sustainability Strategy is developed, it is possible that further risks will be identified and included. It is crucial to continuously assess and address these risks to ensure long-term sustainability and effective climate change mitigation and adaptation measures.

### **Next Steps:**

1. Develop risk scores and mitigation actions for these areas.
2. Identify climate risk indicators for campus in collaboration with key academic colleagues.
3. Identify any gaps linked to development of the Sustainability Strategy
4. Develop climate adaptation plan for campus.

Risk Summary	Risk Detail	Business Impact
1. Compliance with Environmental Legislation	Breach of regulatory legal compliance requirements pertaining to Environment / Sustainability across key areas of: <ul style="list-style-type: none"> <li>• Energy &amp; Carbon</li> <li>• Waste &amp; Resources</li> <li>• Biodiversity</li> <li>• Travel &amp; Transport</li> <li>• Construction &amp; Maintenance of the Estate</li> <li>• Procurement</li> <li>• Emissions to Air &amp; Discharges to Water</li> <li>• Noise</li> <li>•</li> </ul>	Impact on our environment Significant disruption in managing compliance breach Reputational Damage Financial Impact of any breach Cost of UK Emissions Trading Scheme (UKETS) allowance purchases Prosecution Potential to negatively affect staff/student recruitment and staff retention
2. Compliance with non-regulatory commitments	Non regulatory compliance obligations: <ul style="list-style-type: none"> <li>• ISO14001:2015</li> <li>• SDG Accord</li> <li>• Nature Positive Universities</li> <li>• Civic University Agreement</li> <li>• The Leicestershire Climate &amp; Nature Pact</li> <li>•</li> </ul>	Reputational Damage Potential to negatively affect staff/student recruitment and staff retention
3. League Tables	Failure to fully commit to and maintain efforts to do well and / or improve our standing in: <ul style="list-style-type: none"> <li>• THE Impact Rankings</li> <li>• QS Sustainability Rankings</li> <li>• People &amp; Planet</li> <li>• Sustainable Leadership Scorecard</li> </ul>	Reputational Damage Potential to negatively affect staff/student recruitment and staff retention
4. Energy Demand	To meet LUSEP needs Increase required to transition from Gas Increase required from Vehicle charging Infrastructure - fit for purpose	Inability to develop LUSEP Insufficient supply to meet demand Inability to supply power to meet demands
5. Energy Supply	Costs Power outages (planned and unplanned) Utility provider unable to supply to meet increased demand	Affordability Reputation Expectations Commercial needs
6. Scope 1/2	Unable to demonstrate progress towards and meet target for net zero by 2035	Legislative compliance Reputation Cost Expectations Commercial needs



7. Scope 3	Unable to demonstrate progress towards meeting 2045 net zero target	Legislative compliance Reputation Cost Expectations Commercial needs
8. Extreme Weather	From wind, rain (floods), extremes of heat (hot and cold), drought, resulting in: <ul style="list-style-type: none"> <li>• Health &amp; Safety Risk to our staff, student and local community</li> <li>• Interruptions to business</li> <li>• Damage</li> <li>• Increased heating or air conditioning costs</li> </ul> The risk of not addressing the impacts of climate change through a Climate Adaptation Plan	Reputation Cost Energy consumption (higher cost & CO2e emissions) Business continuity Sports delivery
9. Strategy Delivery	Availability of resources: <ul style="list-style-type: none"> <li>• Operating budget</li> <li>• Staffing budget</li> </ul>	Reputation Expectations Commercial needs Potential to negatively affect staff/student recruitment and staff retention
10. Biodiversity	Risk of not maintaining campus biodiversity in support of legislative compliance and not developing biodiversity to support non-regulatory commitments as well as existing plans out of a concern to limit development to the needs for Biodiversity Net Gain.	Reputation Expectations Commercial needs Potential to negatively affect staff/student recruitment and staff retention
11. Staff Training	Failure to engage with all staff to raise awareness of importance of wider sustainability but specifically around knowledge of carbon awareness and the impacts of climate change	Reputation Expectations Potential to negatively affect staff/student recruitment and staff retention

## Health, Safety and Environment Committee



### Change to HSE Committee Constitution

Origin: Secretary

#### Action Required:

To RATIFY the action of the Chair in approving a change to the Committee's constitution to increase the number of co-opted members from one to two.

#### Executive Summary

The Chair has taken action to increase the number of co-opted members on the Committee from one to two in order to provide an opportunity to increase BAME membership of the Committee.

#### Equality Diversity and Inclusion Considerations

Consideration of the BAME membership of the Committee

---

At its October 2023 meeting (M23/43), members noted the Governance and Nominations Committee requirement that key University committees should achieve a diverse membership which included a minimum of 40 per cent female members and 15 per cent BAME members. HSE Committee membership complied with the minimum level for female members but not the level set for BAME members. The Chair and Director of HSW were asked to identify a potential new lay member and reflect upon ways to improve BAME membership of the Committee.

The Chair has taken action to increase the number of co-opted members on the Committee from one to two in order to provide an opportunity to increase BAME membership of the Committee. Dr Sola Afolabi has subsequently been appointed as an additional co-opted member of the Committee.

The Committee's composition and membership for 2023/24 is available on this page:

[Composition and membership | University Committees | Loughborough University \(lboro.ac.uk\)](#)

## Terms of Reference and Composition of HSE's Sub-Committees for 2023/24

Origin: Secretary

### Action Required:

- (i) **To NOTE the unchanged terms of reference and composition for the following sub-committees:**

Chemical Safety Committee

GM/Biosafety Committee

Health Safety Environment Statutory Compliance Sub-Committee

Non-Ionising Radiation Protection Committee

Radiological Protection Committee

- (ii) **To NOTE that the terms of Reference and composition of the Sustainability Sub-Committee have changed. The changes have yet to be formally ratified by the Sub-Committee. Final changes will be confirmed by the Sub-Committee following a forthcoming Strategy and Governance review.**

(i) **To NOTE the Terms of Reference and Composition of its sub-committees where these have not changed:**

(i) **Chemical Safety Sub-committee**

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 not 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 receives reports from Schools or Professional Services on chemical safety.
- Review guidance documents and protocols to ensure compliance to all relevant chemical safety and hazardous waste 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**

Chair	AACME academic
H&S Service	SSDO Chemical Safety officer Fire Safety Officer
FM	DAP for LEV
Sustainability	Environment Manager

Technical Reps from:  
School of Social Sciences  
Wolfson MEME  
Science  
AED  
ABC

Academic representation from:  
AACME  
Wolfson  
Science  
SDC representative  
STEM lab manager  
DAP for DSEAR  
PhD student representative

(ii) **GM/Biosafety Committee**

Terms of Reference and Membership to GM/Biosafety Committee

**Committee Membership**

The GM/Biological Safety committee met for the first time on 21<sup>st</sup> March 2016. It was recognised that although the committee will meet twice a year on general principle, the committee may need to meet more regularly at first to align all the compliance involved with Biological, Genetic Modification and Human Tissue Act legislation into a consistent university wide system.

Member of the GM/Biological Safety Committee consists of:

Chair: SSDO  
University Biological Safety Officer  
Designated Individual of HTA licence  
Health, Safety & Risk Manager  
Environmental Manager

**School Representation:**

Wolfson School x 3

SSEHS x 3

Civil & Building x1

School of Science x2

**Terms of Reference**

- Review information and ensure that adequate discussion takes place to ensure appropriate control measures and containment is in place
- Review policy, guidance documents and protocols to ensure compliance to all relevant Biological/GM legislation
- Peer review risk assessments and aid in the classification of genetic modification work
- Review Audits undertaken across the relevant areas within Schools.
- Ensure systems and procedures align accordingly with the Human Tissue Act and association HTA committee
- Report to the Health, Safety & Environment Committee

### (iii) Health, Safety, Environment Statutory Compliance Sub-Committee

#### 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

#### Membership

Director of Maintenance, Engineering and Sustainability	Rob Sparks
University Compliance Engineer and DAP Asbestos Deputy	Paul Walker
University Health, Safety and Risk Manager	Mike Haynes-Coote
DAP Gas	Jonathan Cripps
DAP HV Electrical	Adam Slater
DAP LV Electrical	Matthew Chadwick
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	Vedika Bansal

#### Right of Attendance:

Director of Estates and Facilities Management	Graham Howard
---	---------------

#### 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:

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

## 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



#### (iv) **Non-Ionising Radiation Protection Committee**

##### **Composition of the Committee:**

Chairperson:	Dean of Science
SSDO	Julie Turner
H&S Service	Oliver Preedy
Laser Safety Adviser	John Tyrer

School Laser Safety Officers from:

AACME

Wolfson

ABC

AED

Design School

Science

SSS

School representatives for EMF/UV areas:

AACME

Science

Wolfson

##### **Terms of Reference**

Review information and ensure that adequate discussion takes place to ensure appropriate control measures and containment is in place

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

## (v) **Radiological Protection 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.

- (ii) **To NOTE that the Terms of Reference and Composition of the Sustainability Sub-Committee have changed. The changes have yet to be formally ratified by the Sub-Committee. Final changes will be confirmed by the Sub-Committee following a forthcoming Strategy and Governance review.**

**Purpose:**

The **Sustainability Sub Committee (SSC)** exists to oversee the development and delivery of sustainability in support of the University Strategy, the Sustainability Strategy and the wider sustainability agenda. It oversees the policies, guidance and action plans which support the Sustainability Strategy and make up the EMS (Environmental Management System) as well as acting as the Management Review Group for the EMS. It co-ordinates the University's activities and responses in this area reporting into the Health, Safety and Environment Committee such that it ultimately reports through to Council providing visibility, overview and assurance in these areas.

**Aims: (and measure of success)**

The Sustainability Sub Committee aims to:

- Support delivery of the Sustainability elements of the University Strategy and the contribution sustainability makes to the overall strategy.
  - Measure: Any evidence specific to delivery of the University Strategy
- Oversee the development and delivery of the Sustainability Strategy.
  - Measure: Strategy delivered by December 2022
  - Measure: Development and delivery of an annual Sustainability Action Plan
- Provide direction on the development and delivery of policies, guidance and action plans which support the Sustainability Strategy across research, teaching, enterprise and operations.
  - Measure: the number of policies, guidance and action plans developed and delivered
- Receive reports on the progress of the above from the relevant stakeholders.
  - Measure: detailed progress reports against action plans to be received from at least 6 key areas during the course of the year selected from:
    - Waste & Resources
    - Emissions and Discharges
    - Travel & Transport
    - Biodiversity
    - Educating for Sustainable Development
    - Sport
    - Procurement
    - Food (Catering & Retail)
    - Imago
    - LSU
- To receive reports on the EMS, undertake Management Review of its progress and provide guidance on its continual improvement.
  - Measure: Completion of the EMS Management Review in May
- To ensure compliance with our Sustainability obligations and review performance against best practice in the sector and more widely.
  - Measure: Completion of our Sustainability obligations which currently include:
    - Sustainability Leadership Scorecard
    - Sustainable Development Goals Accord
    - ISO14001 Obligations

- People & Planet Green League (not a formal obligation yet)
  - UI Green Metric (not a formal obligation yet)
- To monitor national and international legislative and policy developments, and be advised on their implications for the University.
  - Measure: Maintain legal compliance
- To receive reports from and provide guidance to any subgroups of the SSC.
  - Measure: Maintain and develop subgroups of the SSC
- To report after each meeting to other appropriate sub committees and committees on any related matters as required.
  - Measure: Number of reports to other appropriate sub committees and committees
- To provide an annual report to Senate and Council and ensure that Senate and Council are provided with the information required to discharge their duties around Sustainability and Environmental Compliance.
  - Measure: Delivery of an annual report to Senate and Council

**Reports to:**

- Health, Safety and Environment Committee and other Committees as required.
- Representations may also be made by the Chair to ALT and PSLT

**Works alongside:**

- The Loughborough Net Zero Group.
- The Health, Safety and Environment Compliance Sub Committee.

**Sub-Groups:**

The SSC will receive reports from and provide guidance to:

- The Biodiversity Working Group (includes the Woodland Management Group).
- Transport Sustainability Group.
- Any Task and Finish Groups that shall be created to support delivery of the agenda.

**Meets:** 3 times per year

### Membership of the Sustainability Sub Committee:

Position:	Role:	Representative:
<a href="#">APVC CC &amp; NZ</a>	<a href="#">Chair</a>	<a href="#">John Downey</a>
<a href="#">APVC CC &amp; NZ</a>	<a href="#">Deputy Chair</a>	<a href="#">Kathryn North</a>
Director of Estates & Facilities Management	<a href="#">Chair Oversight of the E&amp;FM Operations and the Carbon Emissions</a>	Graham Howard
Director of Maintenance, Engineering & Sustainability	<a href="#">Deputy Chair Oversees the work of the Sustainability Team</a>	Rob Sparks
<a href="#">Acting Sustainability Manager</a>	Convenor. Reports on Strategy, Travel & Biodiversity	<a href="#">Robyn Reeve Elliott Brown</a>
Environmental Manager	Secretary. Reports on Waste, Resource Efficiency, Pollution Prevention, Compliance, EMS	Nik Hunt
A Dean	Member	Paul Conway
Operations Manager(s)	Member.	Ruth Casey
<a href="#">STEER Centre Manager</a>	<a href="#">Member – interest in links to Sustainable Research</a>	Judy Billington
<a href="#">Schools Loughborough in London</a>	<a href="#">Member.</a>	<a href="#">Mmitul Shah</a>
Academic with Sustainability interest	Member. Reports on Education for Sustainable Development (ESD)	Rob Wilby
Snr E&FM Manager	Member. Reports on Sustainable Construction	Martin Channell
Energy Manager	Attendee when required. Reports on Energy but this will, on the whole, be covered the LUNZ Group	Greg Watts
<a href="#">Sustainable Travel Officer</a>	<a href="#">Attendee when required. Reports on Travel &amp; Transport</a>	<a href="#">Elliott Brown</a>
Catering representative	Member. Reports on Sustainable Catering	Dan Brazil
Retail representative	Member. Reports on Sustainable Retail	Karl Christison
Procurement representative	Member. Reports on Sustainable Procurement	Anna Ellis
Organisational Development representative	Member. Reports on Sustainability Training	Sarah Williamson Matt Hope
Sports representative	Member. Reports on Sustainability In Sport	Mark Davies
Imago representative	Member. Reports on Sustainability across the imago venues	<a href="#">Steve Powell Mike Hart</a>
Student Union representative	Member. Reports on Sustainability for the Students Union	<a href="#">Danny Smith Georgia Whelan</a>
Planning representative	Member	Dawn Matthews
Marketing & Advancement representative	Member	Helen Clarke
Technician representative	Member	Imogen Heaton
Student representative	Member	TBC
Staff representative	Member	TBC

**In Attendance:** Administrator to assist with minutes if required.

### Further Context:

The Terms of Reference and Membership are designed to reflect the sub-committee's role to oversee and govern the University Sustainability agenda with particular focus on:

- Creating a sustainable campus.
- Developing sustainable students, staff and visitors.
- Encouraging the development of a Sustainable curriculum, research and enterprise.
- Supporting a sustainable community.

In particular the sub-committee shall consider and support the institutional theme **Climate Change and Net Zero** across the core areas of:

- Research & Innovation – we will grow our research and innovation capacity, in areas such as clean energy and the circular economy, to enable the university to play a leading international role in responding to the climate emergency.
- Education – we will develop students who have a high degree of climate change awareness and carbon literacy so that they can take responsibility for sustainable actions in themselves and others.

- EDI – will help diverse communities around the globe adapt and prosper in a changing world climate.
- International – we will bring together our creative, analytical and technological expertise to accelerate a reduction of global emissions.
- Sport – we will use our expertise and influence to help sporting policymakers and organisations in their transition to net zero.
- Partnerships – we will seek and engage strategic partnerships that will strengthen our response to the climate emergency and help accelerate progress towards net zero.
- University – we will engage staff, develop our estate, and change working practises to achieve net zero emissions from our own operations.

**Sustainability:** meeting our own needs without compromising the ability of future generations to meet their own needs considering the three main pillars of Environmental, Economic and Social. Social Responsibility is a key part of Sustainability.

Sustainability within the University Strategy is delivered through the Sustainability Strategy which can be driven by as well as supporting the 17 UN Sustainable Development Goals (SDG's). Loughborough University is signed up to the SDG Accord the purpose of which:

1. is to inspire, celebrate and advance the critical role that education has in delivering the Sustainable Development Goals (SDGs) and the value it brings to governments, business and wider society.
2. is a commitment learning institutions are making to one another to do more to deliver the goals, to annually report on each signatory's progress, and to do so in ways which share the learning with each other both nationally and internationally.

The 17 SDG's can be found here: <https://sdgs.un.org/goals>

**These proposed final Terms of Reference should be reviewed in 12 months as part of the check of the effectiveness of this Sub-Committee.**

## Health, Safety and Environment Committee



Loughborough  
University

### Incident, Near Miss and Fire Data

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

#### Executive Summary

Summary of activity for noting.

#### Other Committees Consulted

None

#### Equality Diversity and Inclusion Considerations

#### Paper Details

##### Action Required:

None – For information / Assurance purposes

## Serious Incident

There were 2 RIDDORs Reportable incident in the reporting period.

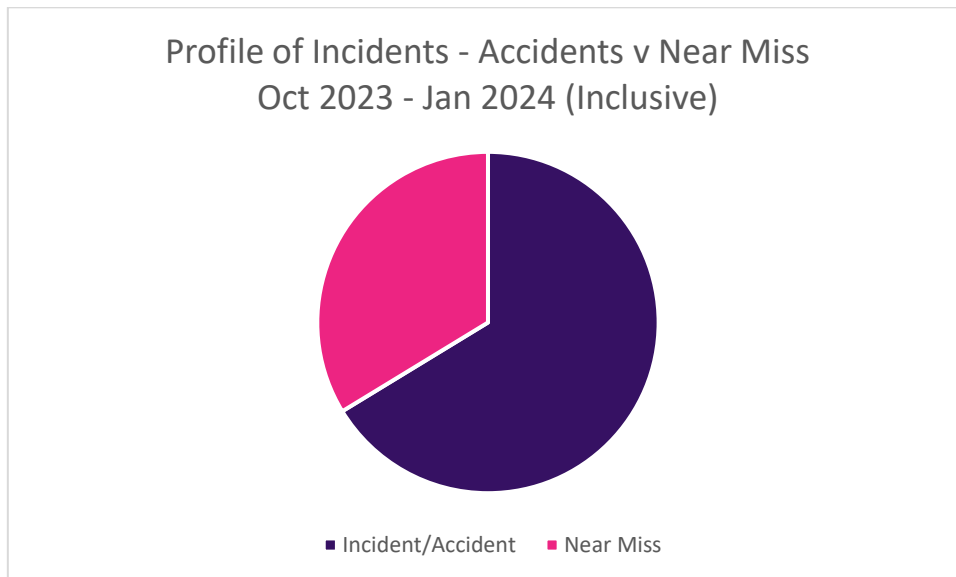
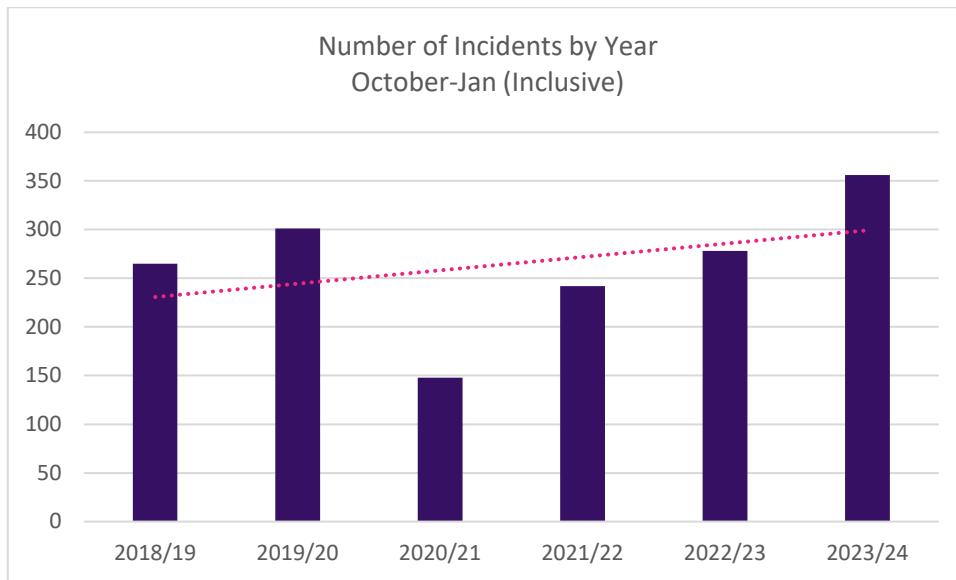
HSE Ref	Date	Org Unit	Accident Type	Type of RIDDOR	Summary
AF12412CF4	18/11/2023	Residential Services	Struck by Fixed or Stationary Object	Injury to non-worker taken directly to hospital for treatment	Student opened the wardrobe. The door fell off it's hinges, causing a small cut to the student's right eyebrow.
	19/12/2023	Imago Ltd	Struck Against	7 Day Work Related Incapacitation Injury	Accidentally struck hand against walk in fridge when closing fridge door. Impact has swollen lower knuckle on right hand.

There were three incidents and two near misses rated as high severity by the Health and Safety Service's internal rating. One of these was taken to Incident Review Panel, involving an injury to a student participating in an Athletic Union sport.

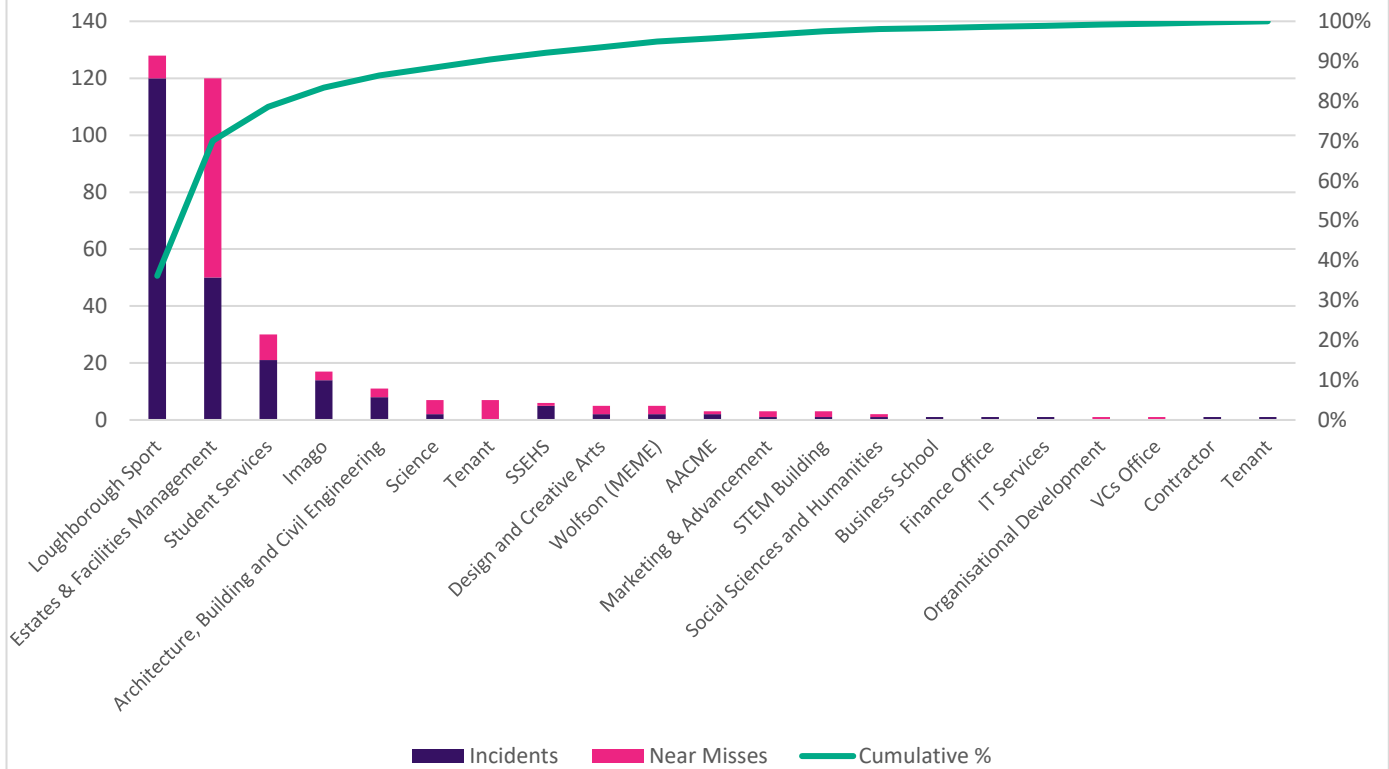
Ref	Date	Org Unit	Accident Type	Summary
5334	25/10/2023	Athletic Union	Sport	2 members were having a sparring round in training at MAC. Person X lands head kick ( from multiple accounts not with excessive force) as person Y made a movement the direction of the kick. Person Y remains conscious



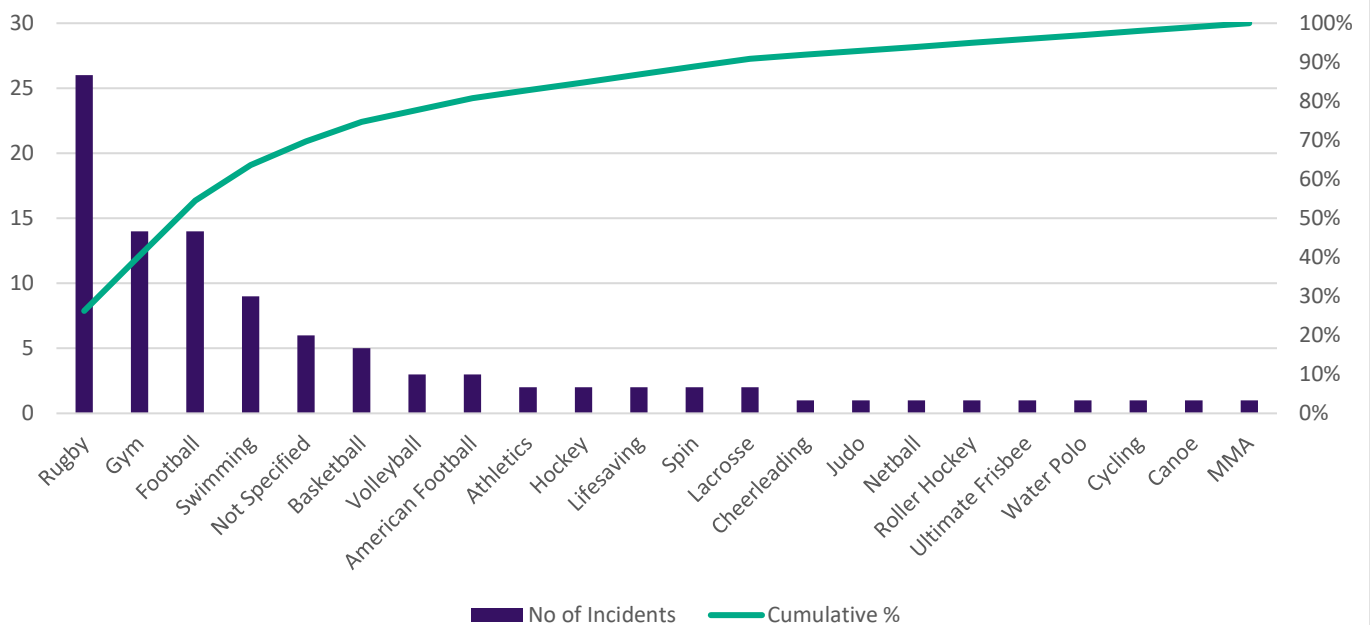
Incident Data and Graphs (excluding Fire Alarm Incidents)



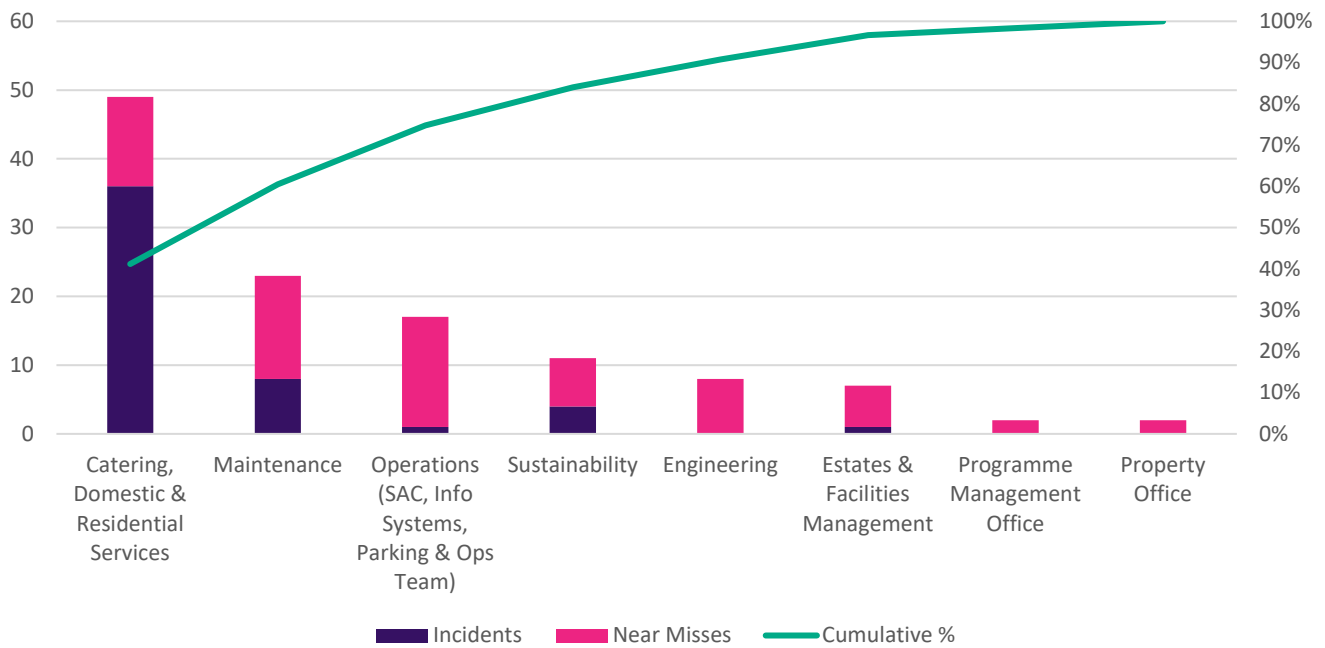
### Pareto Analysis of Accidents and Near Misses by School or Department Oct 2023 - Jan 2024 (Inclusive)



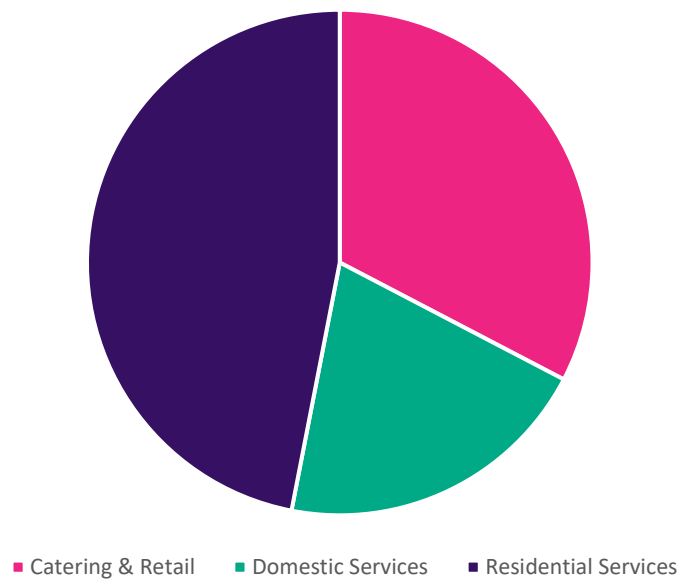
### Pareto Analysis of Sport Participation Injuries Oct 2023-Jan 2024 (Inclusive)



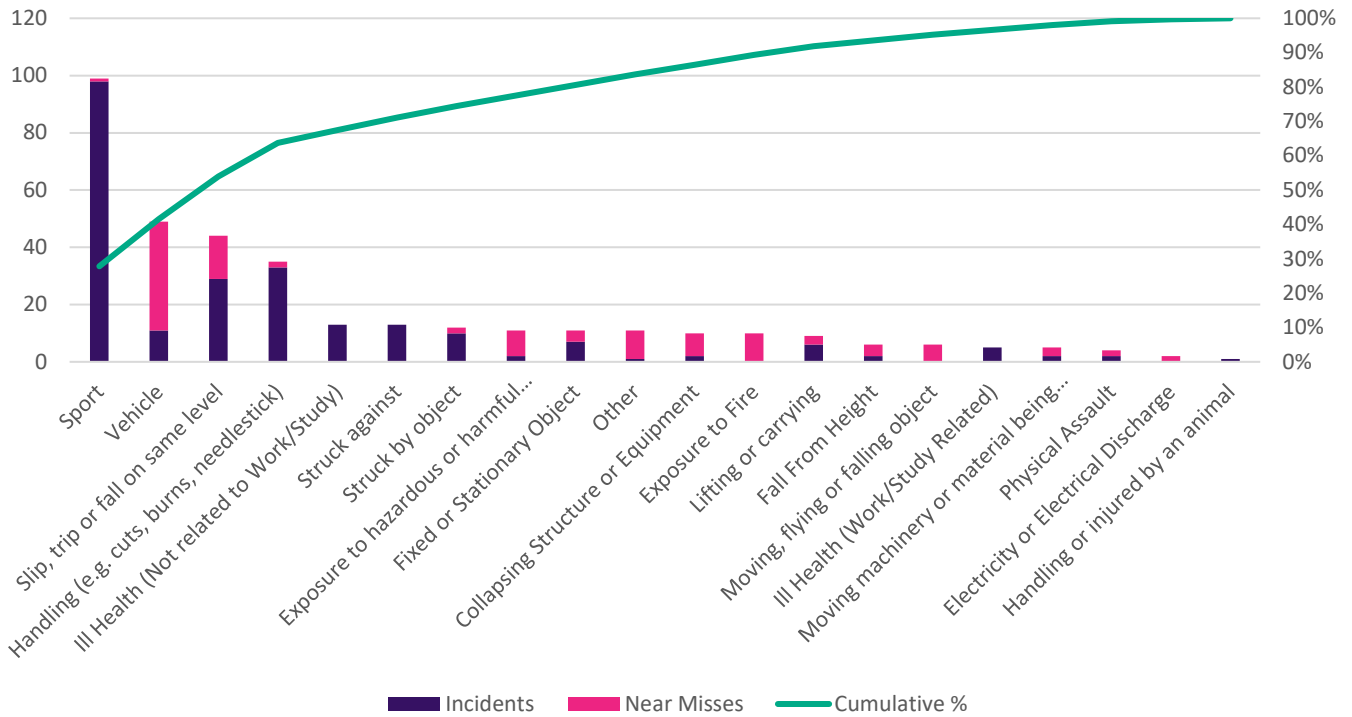
### Pareto Breakdown of EFM Accidents and Near Misses Oct 2023 - Jan 2024 (Inclusive)



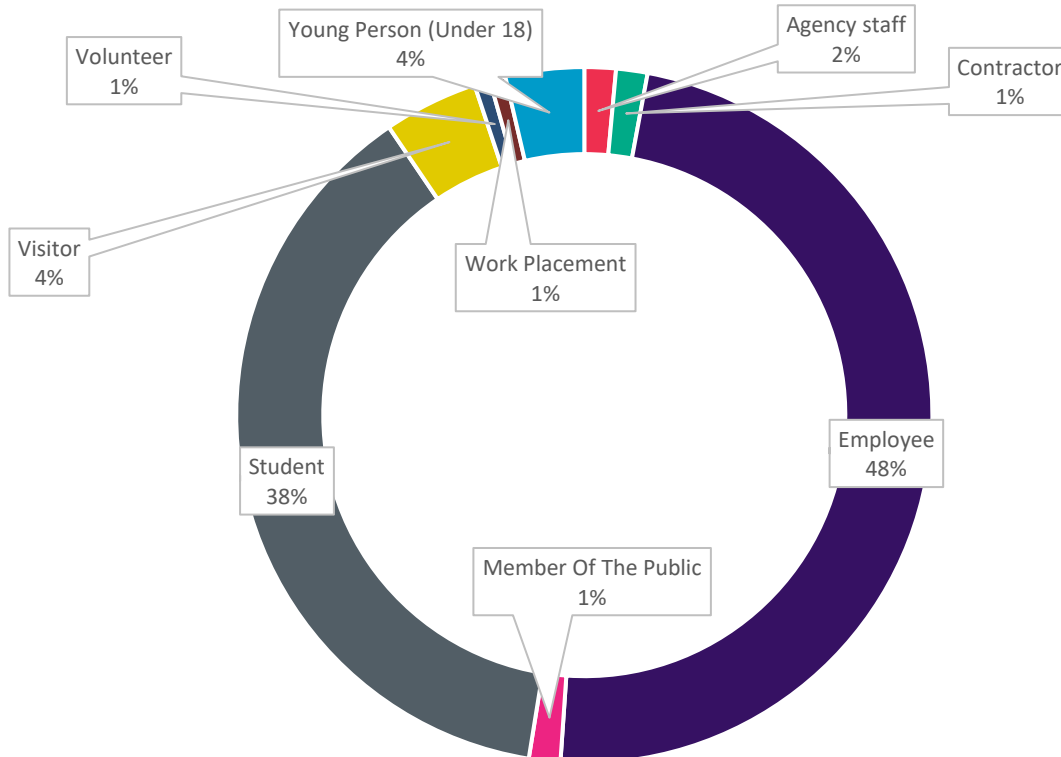
### Breakdown of Incidents and Near Misses in Catering, Domestic and Residential Services Oct 2023 - Jan 2024 (Inclusive)



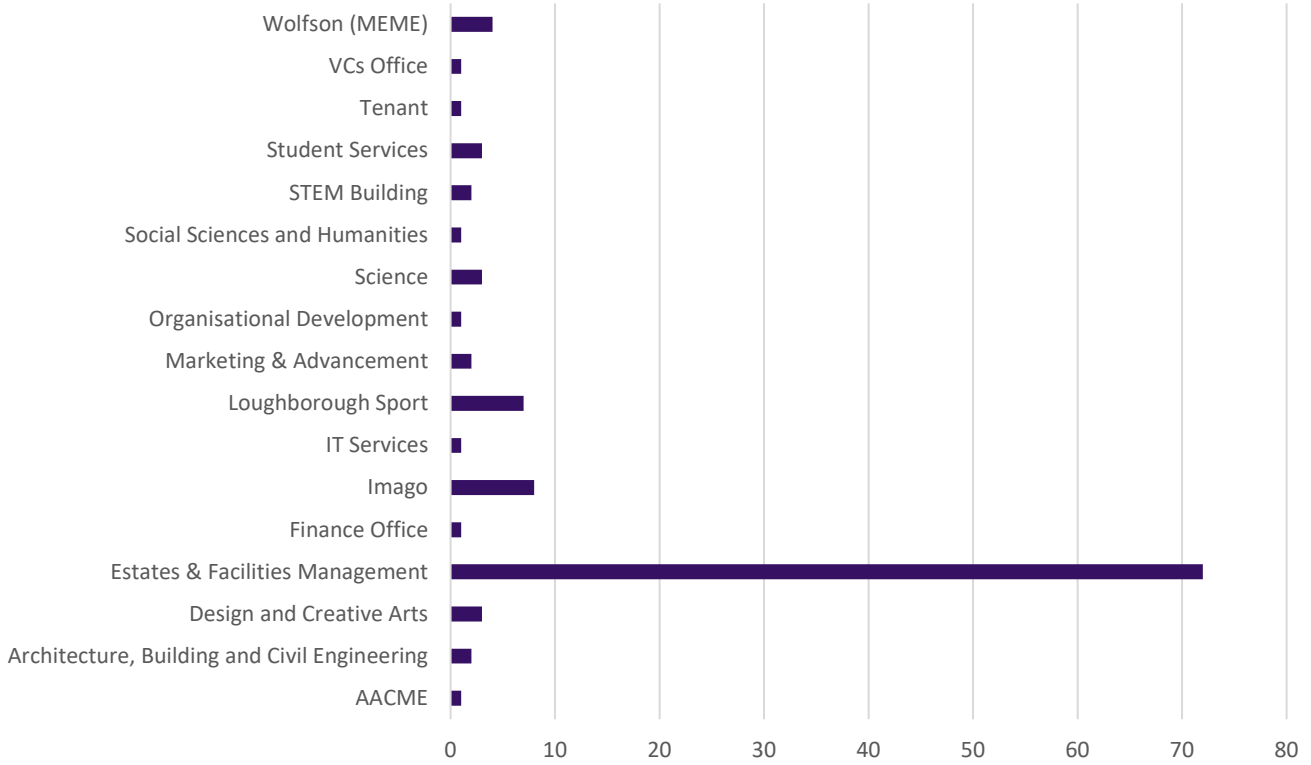
### Pareto Analysis of Accidents and Near Misses (Oct 2023-Jan 2024 (Inclusive))



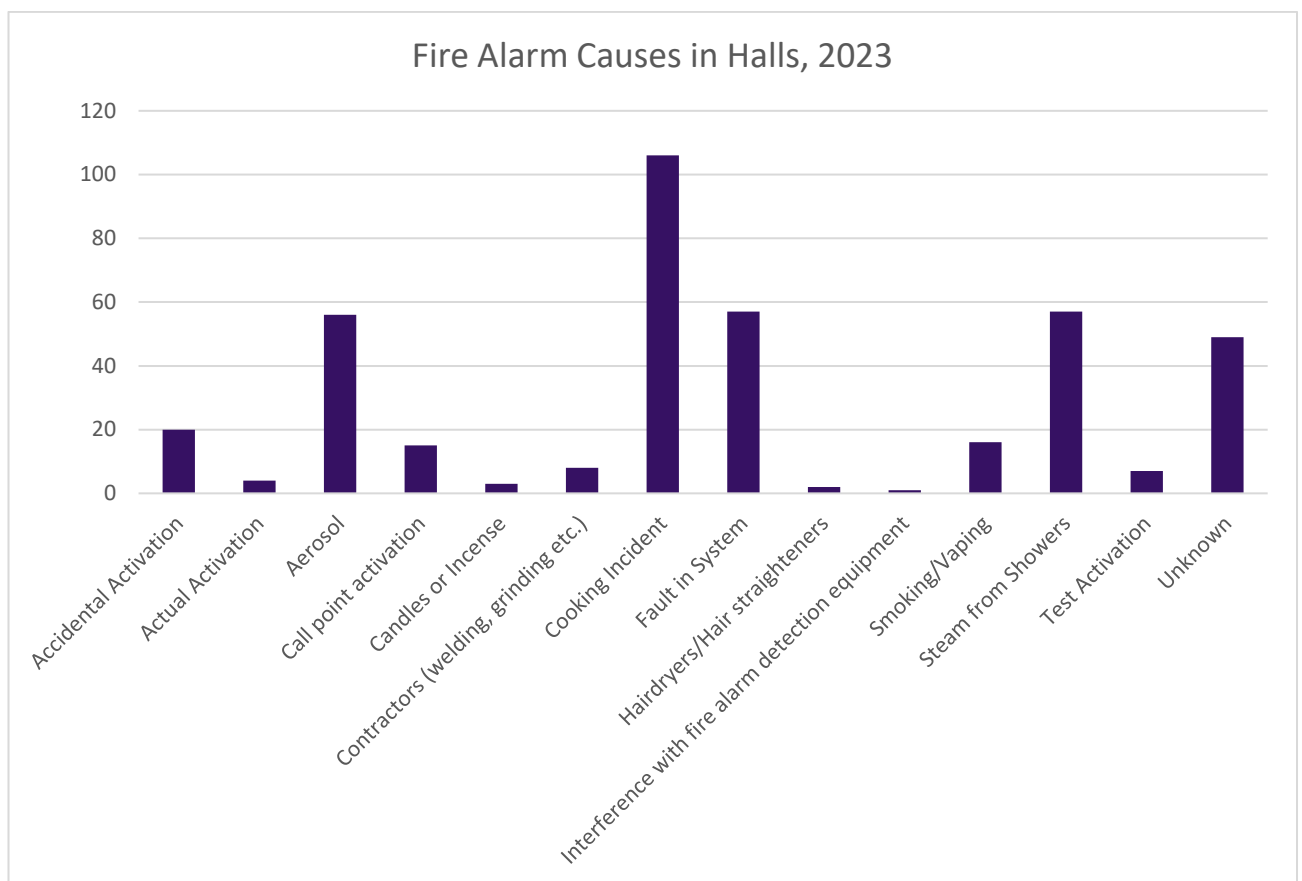
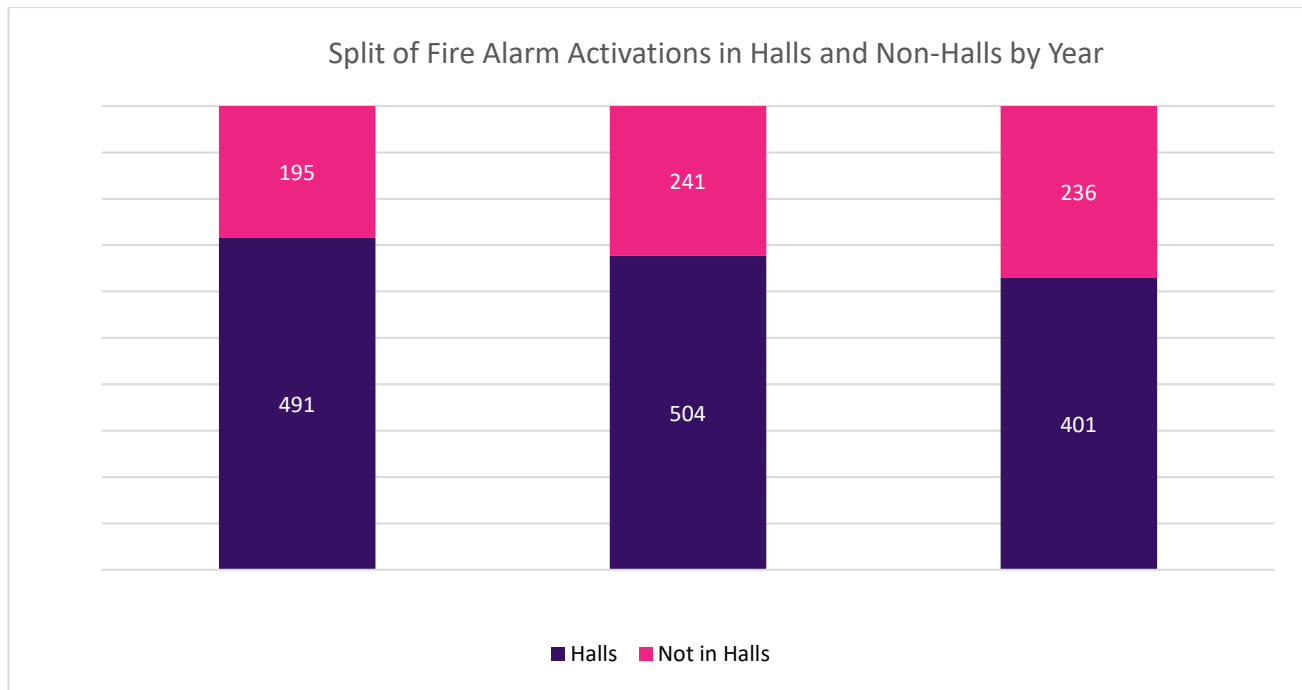
### Profile of Persons affected by Accidents (excluding sport participation) Oct 2023-Jan 2024 (Inclusive)



## Accidents Affecting Employees by Department Oct 2023 - Jan 2024 (Inclusive)



## Fire Alarm Incidents



### Fire Alarm Causes in Non-Halls, 2023

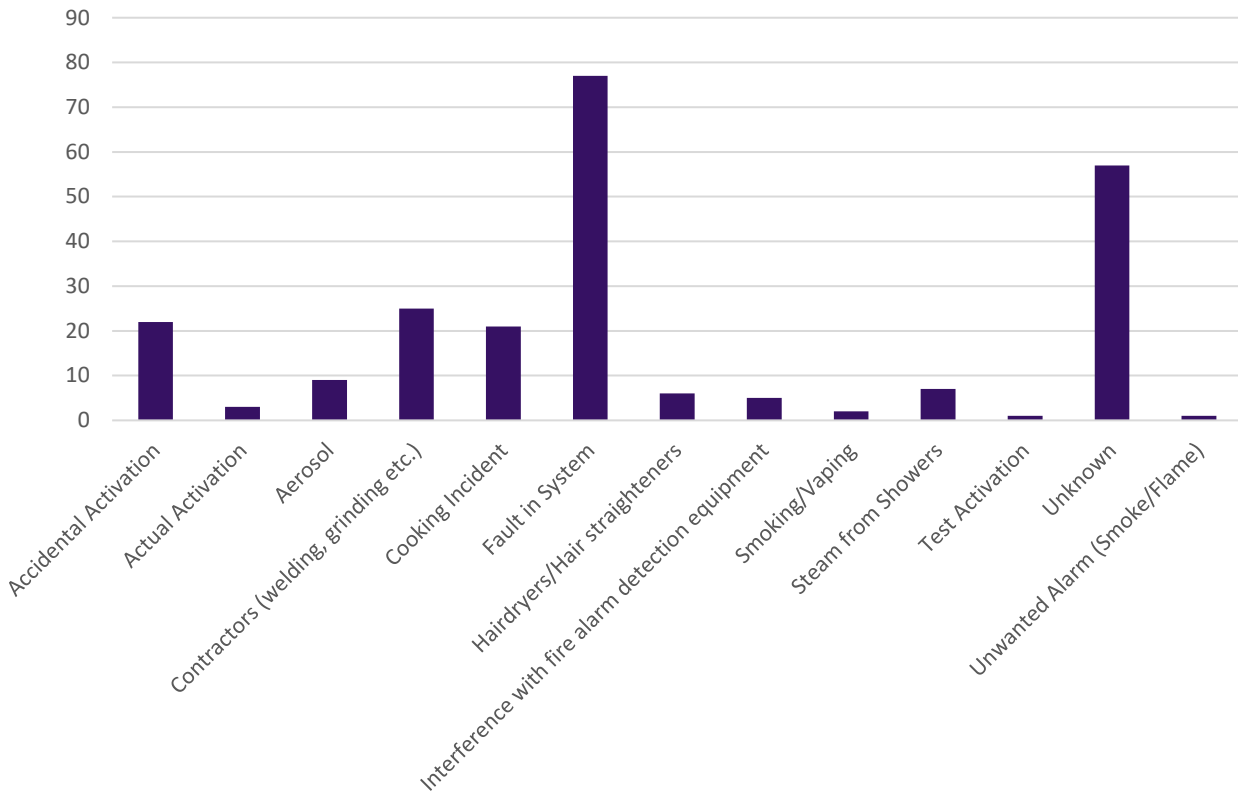
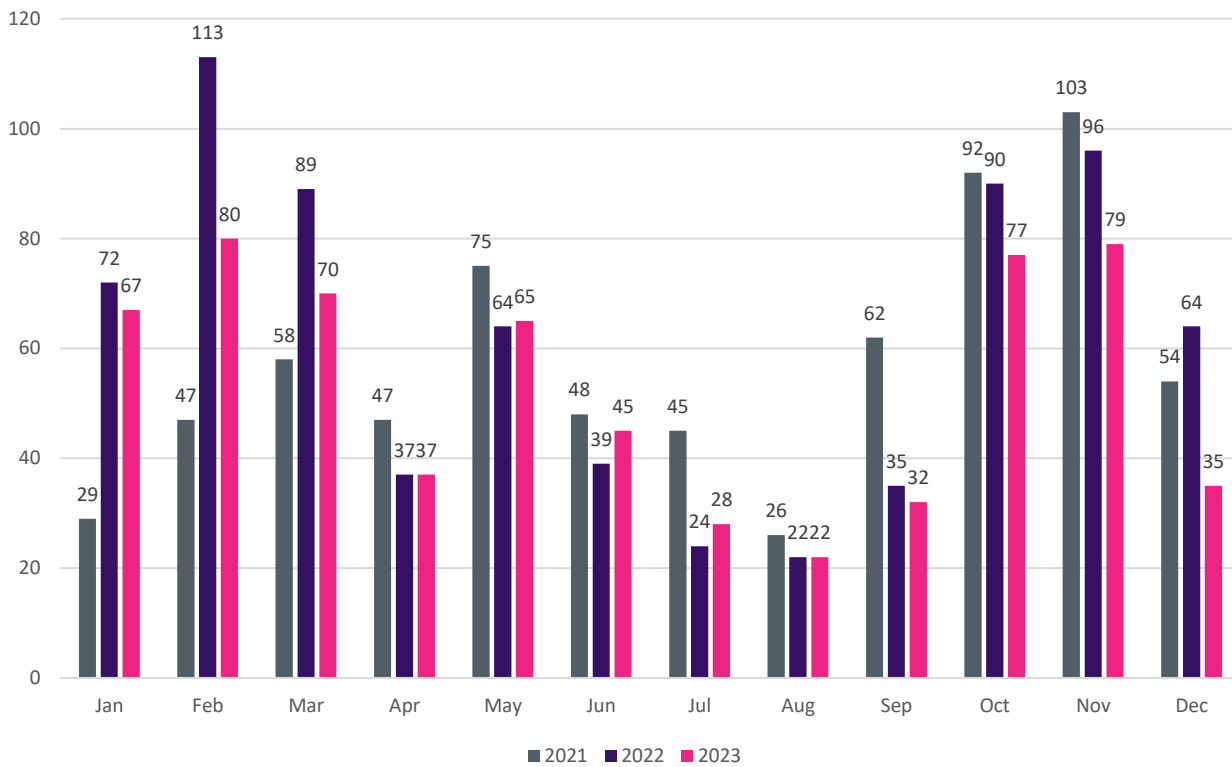
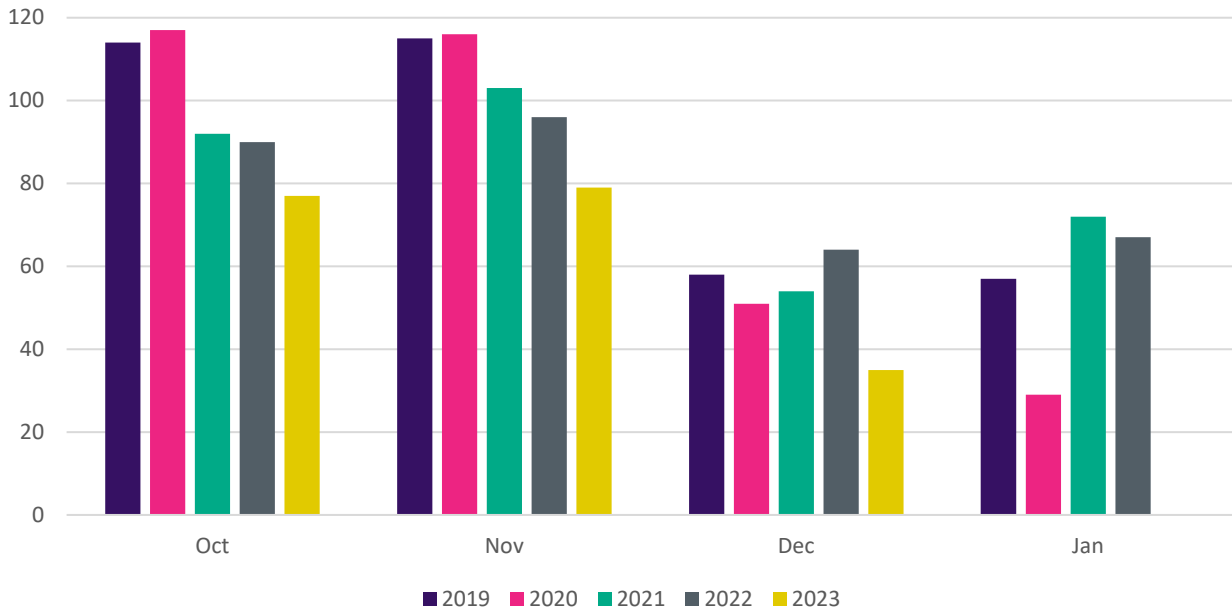


Chart to compare monthly fire alarms in 2021, 2022 and 2023 by month



Analysis of Fire Alarms for the reporting period, last 5 years



Pareto Analysis of Fire Alarms in the Reporting Period

