



## SAF24-M1

Minutes of the Health, Safety and Environment Committee held on Tuesday 6<sup>th</sup> February 2024

### Attendance

#### Members:

Sola Afolabi, Deborah Bowen, Elliott Brown, Neil Budworth, Claudia Eberlein, Sandy Edwards (ab), Alec Edworthy, Graham Howard (ab), Chris Linton (Chair), Liz Monk, Graham Moody, David Roomes, Jagjit Samra (ab), Alex Stacey-Midgley, Luke Stott, Richard Taylor

#### In attendance:

M Ashby (Secretary), Spencer Graydon (for M24/3), Gagan Kapoor (for M24/4), Oliver Preedy (for M24/5), Julie Turner (for M24/6, 7 & 10) and Rob Sparks in place of Graham Howard.

#### Apologies:

Graham Howard, Jagjit Samra.

### 24/1 Minutes

#### SAF23-M3

The minutes of the meeting held on 4<sup>th</sup> October 2023 were APPROVED subject to an amendment to note that Chris Linton had chaired the meeting.

### 24/2 Matters Arising from Previous Meetings

#### SAF24-P1

- 2.1 Actions arising from previous minutes were NOTED and their current status confirmed.
- 2.2 Arising from M23/30 *Snow and Ice Clearance Policy*, the Director of HSW would forward to the Director of Maintenance, Engineering and Sustainability correspondence on EDI issues which had been identified in relation to the proposed guidance. **ACTION: Director of HSW**

### 24/3 Health, Safety and Environment Update: Imago Venues

#### SAF24-P2

- 3.1 The Committee RECEIVED an update from the Chief Executive Officer on health, safety and environmental arrangements at Imago Venues.
- 3.2 The following points were noted in particular:
  - (i) Imago managers met with representatives from the University's Health and Safety Service Team on a quarterly basis. The Imago Operations Director also met with them on a monthly basis to resolve ad hoc issues.

- (ii) The company was putting in place a framework to allow it to operate in a more sustainable way and was about to move to a 50 per cent plant-based offering.
  - (iii) Imago was about to embark on a major project to refurbish Burleigh Court. The work would be completed by December with bedrooms being available for occupancy from January 2025. The building would be handed over to the contractors in a secure state, and there was an expectation that it would be handed back in a similarly secure state.
  - (iv) The University provided support to Imago in some compliance areas such as FGas. Imago was invited to consider whether there were any other areas which it might wish to seek the University's support with to ensure compliance. **ACTION: Secretary to inform Imago Chief Executive Officer**
- 3.3 HSE Committee noted the significant improvements made by Imago Venues in recent years and thanked the Chief Executive for his presentation.

## **24/4 Health, Safety and Environment Update: Catering, Domestic and Residential Services (CDRS)**

### **SAF24-P3**

- 4.1 The Committee RECEIVED an update from the Director of Residential, Catering and Domestic Services on Campus Services, Catering and Accommodation at the University.
- 4.2 The following points were noted in particular:
- (i) CRDS was a high-volume activity business with significant potential for risk. This was mitigated by well-established and documented food safety and residential checks. Training for new starters took place in a single session on taking up their role. Managers were on site during business operation and carried out quality checks.
  - (ii) The majority of incidents fell into the categories of slips, trips, falls and manual handling incidents. Most manual handling injuries were said to be sustained by staff not following manual handling guidance. The risk of further incidents was mitigated by requiring staff to repeat manual handling training and by additional monitoring by their managers.
  - (iii) An incident where a member of staff had been trapped in a freezer due to a faulty door release had not been reported as a RIDDOR incident as it had not been judged to have met any of the RIDDOR category definitions. Measures had been put in place since the incident to ensure that freezer doors were checked on a daily basis, and CDRS was investigating options to instal alarms within freezers.
  - (iv) Incident and near miss reporting had remained at a similar level for the past three years with peaks occurring during term time, which were CDRS's busiest periods. Members noted an omission in the chart for reported near misses in 2023. An updated chart was shared during the meeting and forwarded to the Secretary for the record.
- 4.3 HSE Committee noted the significant measures that had been put in place to keep customers and staff safe. The Director was thanked for his presentation.

## **24/5 Critical Risk, Strategy, Control & Compliance: Chemical Safety Arrangements**

### **SAF24-P4**

- 5.1 The Committee RECEIVED an update by the Senior Health and Safety Specialist on critical risk, strategy, control and compliance with regards to chemical safety arrangements in place at the University.
- 5.2 The following points were noted in particular:
- (i) Most incidents involved staff, rather than students, and usually occurred where an element of the infrastructure was not working as intended.

- (ii) The decommissioning of the F Building had brought to light poor practices in the past, particularly in relation to the transfer of ownership of chemicals when staff and doctoral students left the University. Processes had since been put in place by the School of Science to ensure that this transfer took place and was documented. The School had also introduced an impressive inventory of its chemicals.
  - (iii) The Chemical Safety Committee was effective in operating as a community of best practice.
- 5.3 HSE Committee considered the current measures that were in place to ensure that the University's tenants had appropriate chemical safety arrangements. When renewing their contracts, tenants were required to confirm that chemical and radiation safety measures were compliant. The Health and Safety Service also worked closely with a number of tenants. It ensured that suitable signage was in place in areas occupied by tenants. Estates and FM also provided cleaning and maintenance staff with training and made them aware which areas were safe to enter and maintain.

## **24/6 Human Tissue Act Update**

### **SAF24-P5**

- 6.1 Members RECEIVED an update from the School of Sport, Exercise and Health Sciences on its progress in ensuring compliance with Human Tissue Authority (HTA) requirements.
- 6.2 The Strategic Scientific Technical Lead reported that the School had made significant recent progress and that there had been a noticeable cultural shift within the School. The School had disposed of many thousands of samples and was continuing to check remaining unlogged items and control numbers of new items. Technical staff were continuing to carry out audits on a daily, weekly and monthly basis to ensure compliance.
- 6.3 The School needed to keep up the momentum of its efforts. Going forward, it was embedding a culture of compliance by providing new researchers with an extended HTA induction and ensuring that they were audited throughout the process of their first experiment.
- 6.4 The Strategic Scientific Technical Lead and University's HTA Licence Designate Individual were to audit the School's records in the near future. This audit would be followed up by further audits on a three-monthly basis. If the results of the initial audit were deemed satisfied, the HTA KPI entry in the compliance report to HSE Committee would be changed from a rating of red to amber.
- 6.5 The Committee acknowledged and commended the significant efforts of the School to ensure compliance.

## **24/7 Director of Health, Safety & Wellbeing Update**

### **SAF24-P6**

- 7.1 Members RECEIVED a summary report by the Director of Health, Safety and Wellbeing on issues and actions relating to health, safety, and wellbeing.
- 7.2 The following were noted in particular:
  - (i) Occupancy of Towers was to be extended by a year. Students would remain safe due to the arrangements in place to continue to manage the risk of an occurrence of Legionella. The University would follow UK Health Security Agency requirements by notifying occupants of the managed risk.
  - (ii) An electronic Permit to Work system was being introduced. The initiative would provide an opportunity to refresh existing policies and training.
  - (iii) The Occupational Health and Wellbeing Service was introducing 1:1 health MOTs progressively in response to a need identified in the recent Staff Survey. The MOTs were proving very popular, and there was currently a waiting list. The Service intended to assess demand and may seek additional funding via Operations Committee in order to meet this demand.

- (iv) A University Laser Safety Advisor was being sought following the departure of the previous post holder. The post would be covered by a number of colleagues in the Health and Safety Service and by bought-in consultancy support, so safety standards would be maintained whilst a replacement was sought.
- (v) The immediate implications of the Building Safety Act had been actioned. The Act brought with it amendments to other legislation, such as the Regulatory Reform (Fire Safety) Order 2005, which were now in force. The University was largely compliant with these, and the Health and Safety Service was clarifying the implications for the University in practice, as was normal for new legislation.
- (vi) A fire compliance issue had been identified in Falkner Eggington Court. Measures had been put in place via enhanced fire safety arrangements. Longer term, a compliant engineering solution would need to be found to remove reliance upon the management arrangements. The fire safety lead was working with Estates and FM colleagues to find a solution that also supported the ventilation requirements of the buildings.
- (vii) A new Lead Chaplain, Elizabeth York, had joined the University in January.

## 24/8 Annual Report of the Radiation Protection Officer

### SAF24-P7

- 8.1 Members RECEIVED the Annual Report of the Radiation Protection Officer for 2023.
- 8.2 The following were noted in particular:
  - (i) The Environment Agency had conducted a routine inspection of the University's use and control of radiological material.
  - (ii) Radioactivity users were now required to re-register via a new portal called RADAN.
  - (iii) The University had been asked to advise on development of the Environment Agency's guidance on decommissioning buildings.
  - (iv) The Strategic Scientific Technical Lead had been appointed as the President of the Association of University Radiation Protection Officers. The Senior Health and Safety Specialist had been appointed its Treasurer.
- 8.3 Members APPROVED the 2023 Annual Report of the Radiation Protection Officer and RECOMMENDED it for submission to Council subject to the addition of a reference to the recent visit by the Environment Agency. **ACTION: Strategic Scientific Technical Lead**

## 24/9 Health, Safety and Wellbeing Annual Report

### SAF24-P8

- 9.1 Members RECEIVED the Health, Safety and Wellbeing Annual Report and noted the priorities for 2023/24 and the progress that had been made during 2022/23.
- 9.2 The following were noted in particular:
  - (i) Extensive building work in East Park in future years was likely to impact upon the workload of the Health and Safety Service, as it would need to support and monitor safety arrangements for the new builds and ensure that building controls were in place.
  - (ii) Lessons learnt in the decommissioning of the F Building would inform arrangements for the decommissioning of other buildings prior to the building work.
  - (iii) Measures were being considered to ease pressure on the Occupational Health and Wellbeing Service.
- 9.3 Members RECOMMENDED the annual report for submission to Council.

## 24/10 Proposed Future Business

### SAF24-P9

The Committee APPROVED the plan of proposed business for its May and October meetings.

## 24/11 Statutory Compliance Key Performance Indicators

### SAF24-P10 SAF24-P11

- 11.1 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.
- 11.2 The entry for HTA Inventory/Traceability would be reviewed following the planned audit of SSEHS's records by the Strategic Scientific Technical Lead and the University's HTA Licence Designate Individual.

## 24/12 Climate, Environmental and Sustainability Risk

### SAF24-P12

The Committee RECEIVED an initial assessment of key risks associated with climate change and the potential impact on infrastructure and operations on the University's campuses. The Acting Sustainability Manager was asked to seek advice from the Associate Pro Vice-Chancellors (Climate Change & Net Zero) on next steps for consideration of the assessment. **ACTION: Acting Sustainability Manager**

## 24/13 Constitution, Terms of Reference and Membership for 2023/24

### SAF24-P13

- 13.1 The Committee RATIFIED the action of the Chair in approving a change to its constitution to add a second co-opted member.
- 13.2 Members NOTED that the Committee's membership met Governance and Nominations Committee requirements for minimum levels of BAME membership but not the minimum set for female members. The Chair and Director of HSW would reflect upon ways to improve the gender balance of the Committee. **ACTION: Chair, Director of HSW**

## 24/14 Constitution, Terms of Reference and Membership of Sub-Committees

### SAF24-P14

- 14.1 The Committee NOTED the terms of reference, composition and membership of the following sub-committees:
  - Chemical Safety Committee
  - GM/Biosafety Committee
  - Health, Safety and Environment Sub-Committee
  - Non-ionising Radiation Safety Committee
  - Radiological Protection Sub-Committee
- 14.2 The Committee NOTED that the terms of reference and composition of the Sustainability Committee would be the subject of a forthcoming strategy and governance review.

## 24/15 Incident, Near Miss and Fire Data Report

### SAF24-P15

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

## 24/16 Minutes of Sub-Committees

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

### **SAF24-P16**

Chemical Safety Committee (16<sup>th</sup> January 2024)

### **SAF24-P17**

Health, Safety and Environment Statutory Compliance Sub-Committee (8<sup>th</sup> January 2024)

### **SAF24-P18**

Non-ionising Radiation Safety Committee (4<sup>th</sup> October 2023)

### **SAF24-P19**

Radiological Protection Sub-Committee (23<sup>rd</sup> January 2024)

### **SAF24-P20**

Sustainability Sub-Committee (2<sup>nd</sup> October 2023 & 10<sup>th</sup> January 2024)

## 24/17 Any Other Business

- 17.1 The Committee wished to thank retiring member Deborah Bowen for her valued contributions to the Committee and to the University generally.
- 17.2 Members NOTED that staff were being migrated from the Cisco telephone system to Microsoft Teams, and telephone handsets were being removed from University buildings. Concern was expressed that, with the removal of telephone handsets, it would be more difficult to make emergency calls from communal areas such as labs. The Director of HSW would seek clarification from the Director of IT Services and would feedback to the Committee and to the Joint Negotiating and Consultative Committee. **ACTION: Director of HSW**

## 24/18 Dates of Meetings in 2023/24

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