

University of Warwick

Department of Physics

Health & Safety (H&S) Action Plan - 2024

Introduction

A Health and Safety Action Plan sets out the activities which have and are taking place. The plan supplements the on-going health and safety activities that continue throughout the department and the hosted RTPs.

Overall, the required objectives are:

- The H&S initiatives driven through the University by Council, University Health and Safety Executive Committee (UHSEC), University Health and Safety Committee (UHSC) and by the Heads of Departments/Schools (HoD);
- A positive health and safety culture;
- Compliance with the Leadership and Management of Health and Safety at the University of Warwick document;
- Compliance with legal requirements or best practices for health and safety in all activities;
- Competence throughout our workforce (staff and contractors).

It is required that all staff are aware and are part of this plan.

Plan Content

The plan is compiled from actions that have arisen from three main areas:

1. University Health and Safety (H&S) actions based on current priorities
2. Internal Management Actions – arising from internal audits/inspections, actions from the local H&S Committees and lessons learnt following internal investigations/incidents.
3. External Agencies – arising from external audits/inspections/investigations by such agencies as the Health & Safety Executive (HSE), Environment Agency or BSI.

H&S Services Objectives 2023-2024

The following objectives are set by H&S Services and are included in the department's objectives.

1. Ensure that less than 5% of open actions within the Assure system identified through **Proactive Monitoring** (audits and inspections) are overdue at any given point in time.
2. Ensure that less than 5% of open actions within the Assure system identified through **Reactive Monitoring** (incidents, near misses, ill-health, etc.) are overdue at any given point in time.
3. Ensure that 95% of **Risk Assessments**, identified as being required through risk mapping in in higher hazard spaces, are in place by **January 2024**
4. Ensure that 95% of mandatory H&S **Training** courses (H&S Induction, Fire Safety and DSE) are completed by staff by **January 2024***.

*This is subject to the courses in question being successfully migrated into the Assure system

Monitoring

This safety action plan will be reviewed at the Departmental H&S committee meetings, held quarterly and attended by the Head of Department (HoD).

Key to Status	
GREEN	Closed (Complete)
AMBER	In Progress (state % complete)
RED	Open (Not started)

Key to RACI grid	
R	<ul style="list-style-type: none"> • Who is <u>R</u>esponsible ○ The person assigned to do the task
A	<ul style="list-style-type: none"> • Who is <u>A</u>ccountable ○ The person who makes the <u>final decision</u> and has the <u>ultimate ownership</u>
C	<ul style="list-style-type: none"> • Who is <u>C</u>onsulted ○ The person who must be consulted <u>before</u> a decision or action is taken
I	<ul style="list-style-type: none"> • Who is <u>I</u>nformed ○ The person who must be informed that a decision or action <u>has</u> been taken

Physics H&S Action Plan

	Objectives & Actions	R	A	C	I	Target Date	Status	Action / Outcome
1	Objective: Leadership & Culture							
1.1.	Establish a Departmental H&S statement of intent, define health and safety responsibilities (organisation for health and safety within the Department) and ensure there are local arrangements in place.	Mini meeting	Head of Department	Senior Management team	All Departmental staff	June 2024	Triannual review	<p>Action: Senior Management Team to use the Health and Safety Services Departmental Policy (statement of intent) template. This includes a statement of intent from senior leadership and information on the organisation and specific arrangements in place at departmental level to ensure sound management of health, safety and wellbeing.</p> <p>Outcome: Clear commitment to health and safety made by senior management team; roles and responsibilities defined; local arrangements developed and in place that staff have access to.</p>
1.2.	Ensure adequate resources are put into place for delivery against this plan in terms of time, funding, effort. In order to define the level of resources required we will need to clarify training requirements across the department, as this has significant implication in terms of external training courses. (i.e. we need to complete section 3 first)	Teaching and Research leads, line managers, PI's	Head of Department	Chair of Health and Safety Committee / Senior Management team	Committee members	Ongoing part of planning	Whenever H&S issues have arisen resources have been made available	<p>Action: Senior Management team to define resources required to deliver against this plan. Costs, including any requirements to bring in external trainers or to cover exam fees to be reflected in the 5-year plan.</p> <p>Outcome: Health and safety training considered as part of someone's job, their research or training programme. Staff and students are kept up to date and are aware of</p>

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								health and safety requirements in their own respective areas.
1.3.	Ensure that all hazardous spaces are assigned a space owner and have a hazard assessment assigned on the Quemis Hazard Management System .	Senior Administrator and Space Owners	Head of Department	Managers of users in each space	Estates	Done	Reviewed at inspection or ownership change	Action: Space owner to be assigned to space by Senior Administrator and space owner to complete the hazard assessment with support of the local Health and Safety Officer (HSO). Outcome: Comprehensive hazard data including emergency response plans available.
1.4.	Implement relevant University Health and Safety Policies on a priority basis, develop Departmental local arrangements and implement. List of relevant policies held on University H&S Legal Register	Members of the H&S Mini Meeting	Health & Safety Committee	Those affected by each specific policy	All Departmental staff	March 2020 (ongoing – subject to need)	Complete	Action: University policies reviewed, departmental needs identified, and local arrangements developed. Outcome: University health and safety policies fully integrated into the department processes and any resource implications built into the 5-year planning process.
1.5.	Share relevant H&S information between the University Health and Safety Committee and the Department	Chair of the H&S Committee	Committee Chairs and Secretaries	Committee members / Head of Department	Committee members	Ongoing, every meeting	Committee agenda item	Action: Chair to liaise regularly with the representative member on the UHSC or via the UHSC Secretary. Standard agenda item about communication added. Outcome: Relevant information is communicated or cascaded between committees

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1.6.	Review membership and terms of reference for the Departmental H&S committee on an annual basis and develop standard agenda items.	Chair and Secretary of H&S Committee	Head of Department	Chair and Head of Department	Committee members and Department	Annually at March meeting	Committee agenda item	<p>Action: H&S committee has a membership which is representative of the department and a defined terms of reference that will support delivery of the departmental action plan.</p> <p>Outcome: Successful consideration of risks across the department, understanding of risk profile and continual review of progress against the health and safety plan.</p>
1.7.	Complete Head of Department annual health and safety review checklist.	Head of Department	Head of Department	CoHSC TSM HSO	Health and Safety Department	At request of the Director of H&S	Last completed December 2022	<p>Action: To complete the health and safety checklist at the request of the Director of H&S Services.</p> <p>Outcome: Head of Department assured that matters of health and safety importance are being handled by the Department.</p>

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1.8.	Support the implementation of the University Safety Management System (which will come online in stages starting in 2019. Encourage incident and near miss reporting across the Department and work with the Health and Safety Department where required to support the incident investigation process.	HSO	Head of Department	Health and Safety Committee	Staff and students and anyone working for / on behalf of the Department	Evotix Assure introduced to Department circa 2020	Complete	<p>Action: Head of Department / Chair of the H&S Committee to work with the Health and Safety Department to support the implementation of the Safety Management System as the department is brought online. Line managers / PI's to encourage the reporting of near misses and incidents and to support incident investigation with the Health and Safety Department. H&S Committees (or similar) to monitor incidents being reported and to establish a means to disseminate any relevant lessons learnt.</p> <p>Outcome: Safety Management System brought online and staff and students informed of system. Near miss and incident reporting to become the norm. This should support the reduction of more serious incidents.</p>
2	Objective: Risk Management							
2.1.	Implement appropriate generic risk assessments through Assure produced by the University Health and Safety Department into the Physics Department.	HSO	PI/Line Manager	As appropriate to the specific risk assessments	Relevant staff/students /persons affected	TBD by H&S Services	Generic RA's available through H&S Services – Not fully implemented into Department	<p>Action: Appropriate generic risk assessments for spaces and equipment to be reviewed to identify those applicable to the department as and when they become available locally.</p> <p>Outcome: All activities which have significant risk have been risk assessed.</p>

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2.2.	Principal Investigators (PIs) and line managers to ensure that project and task specific risk assessments are in place and are up to date (covering activities where there is significant risk). To consider all relevant types of risk assessment.	PI/ Line Managers	PI/ Line Managers	Persons involved in the activity	Relevant individuals at risk	TBD	Many RAs exist but there is no clarity about where they are missing	Action: PI/Line Manager to review current risk assessments in place and to develop action plan to develop new where there are gaps and to ensure any already in place are reviewed/updated as required. Outcome: Project and task risk assessments are in place and have appropriate risk assessment assessors and authorisers assigned. Written risk assessments available where they are required, and information disseminated to relevant groups. Compliance and ongoing gaps identified and checked at inspections.
2.3.	Equipment and room type risk assessments are in place for high hazard equipment and spaces. These spaces to be incorporated into the Quemis Hazard Management System by the Space Owner. Department to request access where there is a space that warrants inclusion and to allocate persons to be responsible for the management of this system. <i>Health and Safety Services Objective - Ensure that 95% of Risk Assessments, identified as being required through risk mapping in in higher hazard spaces, are in place by January 2024</i>	Space Owners/PI	Head of Department	Space and equipment users	Space and equipment users	October 2024	Risk assessment mapping is in place and able to highlight where there are gaps. January 2024	Action: High hazard equipment and spaces have been identified. Risk assessments to be put into place or reviewed. Information to be accessible for auditing purposes. Outcome: Relevant risk assessments are in place and space and equipment users understand the hazards and risk control measures. Relevant additional information, such as emergency plans are uploaded onto the Hazard Management System and can be readily retrieved. Staff review the information on a routine basis and revise as necessary. Compliance and

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								ongoing gaps identified and checked at inspections.
2.4.	Review risk profile and add H&S risks to the H&S Services held University risk register	Director of H&S, HSO/HSA	Director of H&S	Head of Department Chair of the Health and Safety Committee	Senior Management Team	Annually by H&S Services/HSO/HSA	Last reviewed October 2023	Action: H&S risk profile to be reviewed by HSO, HSA and inform the Director of H&S Services of any changes. Action plan to be developed with the Departmental Health and Safety Chair and committee members to tackle issues that arise from risk register. Outcome: Risk profile reflects existing risk status and identifies priorities for action. Action plan developed and outstanding risks are incorporated.
2.5.	Chemical inventories to be uploaded into chemical inventory system (LabCup). Chemical inventory system to be implemented across the Department and system to be maintained up to date.	PI's / Stores staff	Head of Department	PI's, staff and Stores staff that are responsible for use of chemicals.	PI's, staff and Stores staff that are responsible for use of chemicals.	October 2024	Progress and implementation is being monitored by IDG and the Department.	Action: PI's / Stores staff to ensure that their chemical inventory is maintained up to date and that this is uploaded into the chemical inventory system and that the system is used and maintained. Outcome: Chemical inventory is up to date.

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2.6.	<p>Programme of health and safety inspections to be carried out across high hazard spaces, prioritised based upon risk. Inspection reports are to be documented in Assure.</p> <p>Outcomes to be reported to the Health and Safety Committee and members of the Senior Management team or RTP management as appropriate. Members of Senior Management team to take a role in actively monitoring performance.</p>	HSO	Head of Department	Space owners/PI's	All users of hazardous spaces	Ongoing as part of risk-based inspection program	Rolling status following inspection programme	<p>Action: Prioritised inspection programme to be carried out and actions reviewed by committee members during committee meetings. Senior Management team to show commitment by supporting inspection programme.</p> <p>Outcome: Local department monitors and tracks progress of resolutions to ensure actions are corrected. Senior Management commitment supports positive safety behaviours in department.</p>
2.7.	<p>Close out actions following incident investigations, formal audits and inspections within the agreed timescale.</p> <p><i>Health and Safety Services Objective - Ensure that less than 5% of open actions within the Assure system identified through Proactive Monitoring (audits and inspections) are overdue at any given point in time & Ensure that less than 5% of open actions within the Assure system identified through Reactive Monitoring (incidents, near misses, ill-health, etc.) are overdue at any given point in time.</i></p>	Those required to provide input to corrective actions	Head of Department	Those required to provide input to corrective actions	Health & Safety Committee	Acceptable timescales depending on action priority (low, medium, high)	Rolling status following inspection actions	<p>Action: Identify responsible person(s) and establish process to close out actions within recommended timescale stated. Acceptable timescales to be discussed with those who are to provide input to corrective actions. H&S Services escalation process is followed regarding actions relating to inspections, audits and incident investigations. Report periodically on progress on actions being taken to H&S Committee.</p> <p>Outcome: Elimination/reduction of hazards which leads to less risk and therefore less incidents or a reduced likelihood of a repeat incident occurring.</p>

	Objectives & Actions	R	A	C	I	Target Date	Status	Action / Outcome
2.8.	<p>Support the implementation of the University Safety Management System (Assure) by transitioning all space and equipment risk assessments to the system.</p> <p><i>Health and Safety Services Objective - Ensure that 95% of Risk Assessments, identified as being required through risk mapping in in higher hazard spaces, are in place by January 2024</i></p>	PI's, Space Owners and those responsible for equipment	Head of Department	Health and Safety Committee	Relevant staff/students /persons affected	March 2024	Risk assessment mapping to be finalised to give percentage. January 2024	<p>Action: PI's, Space Owners and those responsible for equipment are to add all their space and equipment risk assessments to Assure along with any associated documentation to the risk assessment (e.g. SOP's, SSoW).</p> <p>Outcome: Improvement in compliance, increased accessibility, better insights and continuity across the department.</p>
3.	Objective: Training and Competence							
3.1.	<p>All staff (and students) to complete necessary induction courses including the University health and safety induction, local health and safety induction and staff to complete the core mandatory health and safety courses as outlined in the Leadership and Management of Health and Safety at the University if Warwick document available from the University H&S homepage as a minimum. Identify additional relevant health and safety training for all staff based on their job title, role and responsibilities. This may be in the form of an individual or job specific training needs matrix.</p> <p><i>Health and Safety Services Objective - Ensure that 95% of mandatory H&S Training courses</i></p>	Line managers	Head of Department	Line Managers	All staff and students	Ongoing	Data to be available in 'People' module in Assure	<p>Action: Staff and students to complete induction courses and staff to complete the mandatory H&S courses as specified in the Leadership and Management of Health and Safety at the University and to complete other courses relevant to them. Training needs to be identified per job role, activity role and delivery against these to be considered within the financial 5-year planning.</p> <p>Outcome: Staff to have an awareness of health and safety relevant to their own area as well as a general understanding of health and safety/regulatory requirements such that they can perform</p>

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	<p><i>(H&S Induction, Fire Safety and DSE) are completed by staff by January 2024*.</i></p> <p><i>*This is subject to the courses in question being successfully migrated into the Assure system</i></p>							successfully in their role. Training for students embedded within training & research programmes. Training needs in place per job role and/or activity and recognition of gaps when staff leave (who may have taken a lead in a particular area).
3.2.	Health and safety to be built into teaching and research training materials, education resources and lab scripts. Additional H&S training relevant to any research area to be identified, resourced and completed.	Teaching and research staff leads	Head of Department and relevant Heads of Teaching and Research	State	Students		Unlikely to happen unless big drive across campus.	<p>Action: Teaching and PI's to review existing materials to ensure that H&S is sufficiently considered within their core materials and lab scripts. Any additional training needs to be identified by PI's or tutors/student supervisors. PI's/tutors or supervisors to resource appropriate training.</p> <p>Outcome: Students complete the mandatory H&S courses and any relevant training required for them to conduct their own teaching programme, research or student projects.</p>
3.3.	Ensure appropriate method in place for maintaining training records.	University of Warwick	Head of Department	Health and Safety Committee	All staff	TBD	Data to be available in 'People' module in Assure	<p>Action: Agree approach for capturing training records. Mandatory training for staff to be available in Assure under the people module. This can be extended to students (discussion needs to be had with H&S Services). Further training course/material can be added to Assure following the roll out of Mandatory training records in</p>

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								Assure (discussion needs to be had with H&S Services). Outcome: Training records maintained and auditable.
3.4.	Ensure suitable first aid provision and define and deliver any specialist training required in this area (to deal with risks in the Department). Review status of existing provision and revise as necessary.	State	Head of Department	State	All building users via QR posters		Completed for Physic, Physical Sciences & Millburn House Ongoing for MAS (Shared building with Chemistry)	Action: Agree what first aid arrangements are required based on risks in the Department and current status of first aid provision. First aid needs assessment to be completed for Department occupied buildings. Where buildings are shared there must be a joint approach to assessing provisions. Source relevant training (consulting with the University Health and Safety Department) and display First Aid signage across department. Outcome: Adequate first aid arrangements in place and staff/students know what to do and who to contact in the event of a first aid incident.
3.5.	Ensure local fire arrangements are in place and that the groups that the Department are responsible for are made aware of these arrangements.	Health & Safety Committee	Head of Department	All building users	All building users	Annual review required at H&S meeting	Fire evacuation procedure is documented on web pages and has been shared to all members of the	Action: Identify arrangements for evacuating the buildings in a fire evacuation situation. The Department is to implement the approach that building users are all fire wardens. Outcome: All building users will evacuate the building in a fire alarm and situation or knowledge on areas that were unable to be swept or

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							department. Included in Induction	where a person remains in a refuge will be reported to Security.
3.6.	Add other health and safety training needs determined through risk assessment.	Line Managers / PI's	Head of Department	Health and Safety Chair & Committee members	All staff and students	Ongoing	Unlikely to happen unless resources in training materials are filled	Action: Line Managers / PI's to determine and review relevant training needs arising through the risk assessment process, through individual staff annual review process and via any specific project or research risk assessment that may be conducted by either staff or students. Training to be sourced via appropriate means. Outcome: Staff and students receive relevant training to support teaching and research and the delivery of University activities which will help towards the development of competence in the area concerned.

	Objectives & Actions	R	A	C	I	Target Date	Status	Action / Outcome
4.	Objective: Communication, Cross learning and Consistency							
4.1	Improve employees health and safety awareness by communication and training to the department.	HSO	Head of Department/ Director of Operations	Chair of Health and Safety Committee	All staff and students	Ongoing	Complete. Department H&S webpages, H&S news board displayed in Department, termly updates given at Departmental staff meetings	<p>Action: Establish communication channels to disseminate important health and safety messages through department. Department health and safety page to be kept up to date and to link to University Health and Safety webpage for university-wide policies and guidance. Bulletins and newsletters to be disseminated and prominently displayed in the department. Health and Safety updates are communicated to staff through termly Departmental staff meetings.</p> <p>Outcome: Health and safety communicated effectively, and overall awareness improved.</p>